

Received 10-13-15

Space Below For Office Use Only

Colorado Secretary of State
Elections Division
1700 Broadway, Ste. 200
Denver, CO 80290
Ph: (303) 894-2200 ext. 6383
Fax: (303) 869-4861
Email: cpfhelp@sos.state.co.us
www.sos.state.co.us



REPORT OF CONTRIBUTIONS AND EXPENDITURES
(1-45-108, C.R.S.)

Full Name of Committee/Person:	SCANLON FOR COLORADO
	As Shown On Registration
Address of Committee/Person:	10635 NUCLA ST.
City, State & Zip Code:	COMMERCE CITY, CO. 80022
Committee Type:	CANDIDATE COMMITTEE
Name and Address of Financial Institution	FIRST BANK, 15250 D. 104 TH AVE, COMMERCE CITY, CO 80022

SOS ID NUMBER (state and county committees):

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: **Through**
Date 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)	\$3303.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$3303.00
4	Total Monetary Expenditures (line 19)	\$2726.43
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 – line 4)	\$576.57

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: CHRIS H. MOOT Z

Registered Agent's Signature: Chris H. Moot Date: 10/13/15

Print Candidate Name: MICHAEL A. SCANLON

Candidates Signature: Michael A. Scanlon Date: 10/13/15

DETAILED SUMMARY

Full Name of Committee/Person: SCANLON FOR COLORADO

Current Reporting Period: 02/06/15 **Through** 10/08/15

	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)] (Please list on Schedule "A")	\$3240.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$63.00 (also listed in Schedule A)
8	Loans Received (Please list on Schedule "C")	\$0.00
9	Total of Other Receipts (Interest, Dividends, etc.)	\$0.00
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$0.00
11	Total Monetary Contributions (Total of lines 6 through 10)	\$3303.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$205.46
13	Total Contributions (Line 11 + line 12)	\$3508.46
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$2506.56
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$119.87
16	Loan Repayments Made (Please list on Schedule "C")	\$0.00
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$100.00
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$205.46
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$2726.43
20	Total Spending (Line 18 + line 19)	\$2931.89

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

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

Full Name of Committee/Person: SCANLON FOR COLORADO

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/5/15	4. Name (Last, First): <u>HERRERA, AARON</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>16361 E. 104TH PL.</u>
3. <u>Aggregate Amt. *</u> \$25.00	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 10/3/15	4. Name (Last, First): <u>HERRERA, MONICA</u>
2. <u>Contribution Amt.</u> \$150.00	5. Address: <u>4096 W. UNION AVE</u>
3. <u>Aggregate Amt. *</u> \$150.00	6. City/State/Zip: <u>DENVER, CO 80236</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>LIBERTY MUTUAL</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>SENIOR ANALYST</u>

1. <u>Date Accepted</u> 9/27/15	4. Name (Last, First): <u>ODORISIO, STEVE</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>7403 RACE ST.</u>
3. <u>Aggregate Amt. *</u> \$25.00	6. City/State/Zip: <u>WELBY, CO 80229</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 9/16/15	4. Name (Last, First): <u>PALMER, NATHALIE</u>
2. <u>Contribution Amt.</u> \$30.00	5. Address: <u>5225 FERNBROOK DR.</u>
3. <u>Aggregate Amt. *</u> \$30.00	6. City/State/Zip: <u>CENTREVILLE, VA. 20120</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: SCANLON FOR COLORADO

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 3/15/15	4. Name (Last, First): <u>STEVEN O'DORISIO</u>
2. <u>Contribution Amt.</u> \$50.00	5. Address: <u>7403 RACE ST</u>
3. <u>Aggregate Amt. *</u> \$75.00	6. City/State/Zip: <u>WELBY, CO 80229</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 3/25/15	4. Name (Last, First): <u>RANDALL, ROBERT</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>10940 UNITY PARKWAY</u>
3. <u>Aggregate Amt. *</u> \$100.00	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>CITY AND COUNTY OF DENVER</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>ENGINEER</u>

1. <u>Date Accepted</u> 4/6/15	4. Name (Last, First): <u>HERMSMEYER, NORRIS</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>P.O. BOX 1426</u>
3. <u>Aggregate Amt. *</u> \$100.00	6. City/State/Zip: <u>BOULDER, CO 80306</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>SELF EMPLOYED</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>PROPERTY MANAGER</u>

1. <u>Date Accepted</u> 4/6/15	4. Name (Last, First): <u>SINGLETARY, KENNETH</u>
2. <u>Contribution Amt.</u> \$50.00	5. Address: <u>P.O. BOX 52364</u>
3. <u>Aggregate Amt. *</u> \$50.00	6. City/State/Zip: <u>BOSTON, MA 02205</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: SCANLON FOR COLORADO

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 4/13/15	4. Name (Last, First): <u>BISHOP, BEVERLY</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>4054 W. 74TH AVE</u>
3. <u>Aggregate Amt. *</u> \$25.00	6. City/State/Zip: <u>WESTMINSTER, CO 80030</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 4/18/15	4. Name (Last, First): <u>BEEN, ANDREW</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>1560 E 84TH AVE</u>
3. <u>Aggregate Amt. *</u> \$50.00	6. City/State/Zip: <u>DENVER, CO 80229</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 4/16/15	4. Name (Last, First): <u>MATKOWSKY, ADAM</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>13352 FRANKLIN ST</u>
3. <u>Aggregate Amt. *</u> \$25.00	6. City/State/Zip: <u>THORNTON, CO 80241</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 4/18/15	4. Name (Last, First): <u>D'LALLO, ANTONIO</u>
2. <u>Contribution Amt.</u> \$50.00	5. Address: <u>9012 GALE BLVD, UNIT 5</u>
3. <u>Aggregate Amt. *</u> \$50.00	6. City/State/Zip: <u>THORNTON, CO 80260</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: SCANLON FOR COLORADO

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 4/18/15	4. Name (Last, First): <u>MOOTZ, CLAIRE</u>
2. <u>Contribution Amt.</u> \$50.00	5. Address: <u>10801 CHAMBERS WAY</u>
3. <u>Aggregate Amt. *</u> \$50.00	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 3/14/15	4. Name (Last, First): <u>SCANLON, MILDRED</u>
2. <u>Contribution Amt.</u> \$60.00	5. Address: <u>10300 TRUNDLE PL</u>
3. <u>Aggregate Amt. *</u> \$140.00	6. City/State/Zip: <u>MANASSAS, VA 20109</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>NONE</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> 3/20/15	4. Name (Last, First): <u>MOOTZ, CHRIS</u>
2. <u>Contribution Amt.</u> \$30.00	5. Address: <u>10801 CHAMBERS WAY</u>
3. <u>Aggregate Amt. *</u> \$30.00	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 2/10/15	4. Name (Last, First): <u>SCHOEN, ROBERT</u>
2. <u>Contribution Amt.</u> \$5.00	5. Address: <u>5521 XANADU ST</u>
3. <u>Aggregate Amt. *</u> \$5.00	6. City/State/Zip: <u>DENVER, CO 80239</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH</u>
	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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: SCANLON FOR COLORADO

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 2/10/15	4. Name (Last, First): <u>MYERS, JOHN</u>
2. <u>Contribution Amt.</u> \$20.00	5. Address: <u>16154 E 105TH AVE.</u>
3. <u>Aggregate Amt. *</u> \$20.00	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 2/10/15	4. Name (Last, First): <u>NEWMAN, LINDA</u>
2. <u>Contribution Amt.</u> \$20.00	5. Address: <u>10976 LIMA ST.</u>
3. <u>Aggregate Amt. *</u> \$20.00	6. City/State/Zip: <u>HENDERSON, CO 80640</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 3/19/15	4. Name (Last, First): <u>HOLIDAY, KEVIN</u>
2. <u>Contribution Amt.</u> \$15.00	5. Address: <u>1838 KITTREDGE ST</u>
3. <u>Aggregate Amt. *</u> \$15.00	6. City/State/Zip: <u>AURORA, CO 80011</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 2/16/15	4. Name (Last, First): <u>HENRY, EVA</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>4455 115TH AVE</u>
3. <u>Aggregate Amt. *</u> \$100.00	6. City/State/Zip: <u>THORNTON, CO 80233</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>ADAMS COUNTY COLORADO</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>COMMISSIONER</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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: SCANLON FOR COLORADO

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 2/10/15	4. Name (Last, First): <u>STRAUSS, HENRY</u>
2. <u>Contribution Amt.</u> \$200.00	5. Address: <u>4060 S CHERRY</u>
3. <u>Aggregate Amt. *</u> \$200.00	6. City/State/Zip: <u>ENGLEWOOD, CO 80113</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>NONE</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> 2/3/15	4. Name (Last, First): <u>SOLANO, JUDITH</u>
2. <u>Contribution Amt.</u> \$50.00	5. Address: <u>14789 HARRISON ST</u>
3. <u>Aggregate Amt. *</u> \$50.00	6. City/State/Zip: <u>BRIGHTON, CO 80602</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 2/17/15	4. Name (Last, First): <u>MARQUEZ, TOM</u>
2. <u>Contribution Amt.</u> \$10.00	5. Address: <u>1135 W 144TH PL</u>
3. <u>Aggregate Amt. *</u> \$10.00	6. City/State/Zip: <u>WESTMINSTER, CO 80023</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 2/17/15	4. Name (Last, First): <u>MARQUEZ, KAREN</u>
2. <u>Contribution Amt.</u> \$10.00	5. Address: <u>1135 W 144TH PL</u>
3. <u>Aggregate Amt. *</u> \$10.00	6. City/State/Zip: <u>WESTMINSTER, CO 80023</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: SCANLON FOR COLORADO

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 2/28/15	4. Name (Last, First): <u>WISNIEWSKI, LINDA</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>10525 DEXTER DR</u>
3. <u>Aggregate Amt. *</u> \$25.00	6. City/State/Zip: <u>THORNTON, CO 80233</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 2/28/15	4. Name (Last, First): <u>PENISTON, CHERYLIN</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>10344 MEADE LOOP</u>
3. <u>Aggregate Amt. *</u> \$25.00	6. City/State/Zip: <u>WESTMINSTER, CO 80031</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 5/2/15	4. Name (Last, First): <u>WU, ZEYEN</u>
2. <u>Contribution Amt.</u> \$75.00	5. Address: <u>9277 E 108TH DR</u>
3. <u>Aggregate Amt. *</u> \$75.00	6. City/State/Zip: <u>HENDERSON, CO 80640</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 5/2/15	4. Name (Last, First): <u>SOTO, VALERIE</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>12225 E 39TH AVE</u>
3. <u>Aggregate Amt. *</u> \$25.00	6. City/State/Zip: <u>DENVER, CO 80239</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH</u>
	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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: SCANLON FOR COLORADO

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 5/2/15	4. Name (Last, First): <u>HERRERA, AARON</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>16361 E 104TH PL</u>
3. <u>Aggregate Amt. *</u> \$50.00	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>CITY OF FT LUPTON</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>ASSISTANT ADMINISTRATOR</u>

1. <u>Date Accepted</u> 5/21/15	4. Name (Last, First): <u>NELSON, MARY</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>4316 COTSWOLDS HILL LANE</u>
3. <u>Aggregate Amt. *</u> \$200.00	6. City/State/Zip: <u>FAIRFAX, VA 22030</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>GEORGE MASON UNIVERSITY</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>PROFESSOR</u>

1. <u>Date Accepted</u> 5/29/15	4. Name (Last, First): <u>POLIS, JARED</u>
2. <u>Contribution Amt.</u> \$250.00	5. Address: <u>P.O. BOX 24749</u>
3. <u>Aggregate Amt. *</u> \$250.00	6. City/State/Zip: <u>DENVER, CO 80224</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>U.S. GOVERNMENT</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>CONGRESSMAN</u>

1. <u>Date Accepted</u> 7/25/15	4. Name (Last, First): <u>ESQUIBEL, ANTONIO</u>
2. <u>Contribution Amt.</u> \$50.00	5. Address: <u>9740 MELODY DR</u>
3. <u>Aggregate Amt. *</u> \$50.00	6. City/State/Zip: <u>NORTHGLENN, CO 80260</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	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 A – Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: SCANLON FOR COLORADO

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 7/25/15	4. Name (Last, First): <u>PEDROZA, LILA</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>3712 E 127TH LANE</u>
3. <u>Aggregate Amt. *</u> \$25.00	6. City/State/Zip: <u>THORNTON, CO 80241</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 7/26/15	4. Name (Last, First): <u>ULIBARRI, ERNESTINE</u>
2. <u>Contribution Amt.</u> \$40.00	5. Address: <u>6961 KRAMERIA ST</u>
3. <u>Aggregate Amt. *</u> \$40.00	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 7/25/15	4. Name (Last, First): <u>PETERSON, CAROL</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>7648 UMATILLA ST</u>
3. <u>Aggregate Amt. *</u> \$25.00	6. City/State/Zip: <u>DENVER, CO 80221</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 7/25/15	4. Name (Last, First): <u>HAMILTON, JESSY</u>
2. <u>Contribution Amt.</u> \$10.00	5. Address: <u>10922 FOREST CIRCLE</u>
3. <u>Aggregate Amt. *</u> \$10.00	6. City/State/Zip: <u>THORNTON, CO 80233</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: SCANLON FOR COLORADO

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 7/25/15	4. Name (Last, First): <u>MATKOWSKY, ADAM</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>13352 FRANKLIN ST</u>
3. <u>Aggregate Amt. *</u> \$50.00	6. City/State/Zip: <u>THRNTON, CO 80241</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 7/25/15	4. Name (Last, First): <u>BENSON, JAMES</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>10448 OURAY ST</u>
3. <u>Aggregate Amt. *</u> \$100.00	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>SELF EMPLOYED</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>ATTORNEY (CLIENTS INCLUDE CITY OF COMMERCE CITY)</u>

1. <u>Date Accepted</u> 7/25/15	4. Name (Last, First): <u>O'DORISIO, STEVEN</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>7403 RACE ST</u>
3. <u>Aggregate Amt. *</u> \$100.00	6. City/State/Zip: <u>WELBY, CO 80229</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>ADAMS COUNTY COLORADO</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>COMMISSIONER</u>

1. <u>Date Accepted</u> 7/25/15	4. Name (Last, First): <u>SERNA, GUILLERMO</u>
2. <u>Contribution Amt.</u> \$20.00	5. Address: <u>14122 E 102ND PL</u>
3. <u>Aggregate Amt. *</u> \$20.00	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH</u>
	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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: SCANLON FOR COLORADO

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 9/14/15	4. Name (Last, First): <u>FAUGHT, JOHN</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>379 DETROIT ST.,</u>
3. <u>Aggregate Amt. *</u> \$100.00	6. City/State/Zip: <u>DENVER, CO 80206</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>THE KEMPE FOUNDATION</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>ATTORNEY</u>

1. <u>Date Accepted</u> 9/13/15	4. Name (Last, First): <u>THOMAS, MICHAEL</u>
2. <u>Contribution Amt.</u> \$20.00	5. Address: <u>9489 E. 107TH PL.</u>
3. <u>Aggregate Amt. *</u> \$20.00	6. City/State/Zip: <u>HENDERSON, CO 80640</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 9/11/15	4. Name (Last, First): <u>CORN, PHILIP</u>
2. <u>Contribution Amt.</u> \$50.00	5. Address: <u>323 MELODY, DR</u>
3. <u>Aggregate Amt. *</u> \$50.00	6. City/State/Zip: <u>NORTHGLENN, CO 80260</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 8/25/15	4. Name (Last, First): <u>ARNOLD, TAMMY</u>
2. <u>Contribution Amt.</u> \$50.00	5. Address: <u>131 HAMILTON PARKWAY</u>
3. <u>Aggregate Amt. *</u> \$50.00	6. City/State/Zip: <u>LEXINGTON, KY 40504</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

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

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

Full Name of Committee/Person: SCANLON FOR COLORADO

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 4/6/15	4. Name (Last, First): <u>HOPP, JEFF</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>2485 E. LOUISIANA PL</u>
3. <u>Aggregate Amt. *</u> \$25.00	6. City/State/Zip: <u>AURORA, CO 80018</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 3/31/15	4. Name (Last, First): <u>BEEN, ANDREW</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>1560 E. 84TH AVE</u>
3. <u>Aggregate Amt. *</u> \$25.00	6. City/State/Zip: <u>WELBY, CO 80229</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 7/10/15	4. Name (Last, First): <u>SPANN, MARTIN</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>4145 PECOS ST</u>
3. <u>Aggregate Amt. *</u> \$100.00	6. City/State/Zip: <u>DENVER, CO 80211</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>NONE</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> 8/3/15	4. Name (Last, First): <u>SCANLON, MILDRED</u>
2. <u>Contribution Amt.</u> \$30.00	5. Address: <u>10300 TRUNDLE PL</u>
3. <u>Aggregate Amt. *</u> \$30.00	6. City/State/Zip: <u>MANASSAS, VA 20109</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/2/15	4. Name (Last, First): _____ NELSON, MARY _____
2. <u>Contribution Amt.</u> \$100.00	5. Address: _____ 4316 COTSWOLDS HILL LANE _____
3. <u>Aggregate Amt. *</u> \$100.00	6. City/State/Zip: _____ FAIRFAX, VA 22030 _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____ CHECK _____
	8. Employer (if applicable, <u>mandatory</u>): _____ GEORGE MASON UNIVERSITY _____
	9. Occupation (if applicable, <u>mandatory</u>): _____ PROFESSOR _____

1. <u>Date Accepted</u> 9/29/15	4. Name (Last, First): _____ BRICKER, JEFFREY AND SARA _____
2. <u>Contribution Amt.</u> \$50.00	5. Address: _____ 8106 WOOD POINT PLACE _____
3. <u>Aggregate Amt. *</u> \$50.00	6. City/State/Zip: _____ ELLICOTT CITY, MD 210 _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____ CHECK _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 10/1/15	4. Name (Last, First): _____ HENKEL, JANETTE _____
2. <u>Contribution Amt.</u> \$30.00	5. Address: _____ 222 10283 URAVAN ST _____
3. <u>Aggregate Amt. *</u> \$30.00	6. City/State/Zip: _____ 2002 COMMERCE CITY, CO 80022 _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____ CASH _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 10/1/15	4. Name (Last, First): _____ SCANLON, MILDRED _____
2. <u>Contribution Amt.</u> \$50.00	5. Address: _____ 10300 TRUNDLE PLACE _____
3. <u>Aggregate Amt. *</u> \$80.00	6. City/State/Zip: _____ MANASSAS, VA 20109 _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____ CHECK _____
	8. Employer (if applicable, <u>mandatory</u>): _____ NONE _____
	9. Occupation (if applicable, <u>mandatory</u>): _____ RETIRED _____

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

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

Full Name of Committee/Person: SCANLON FOR COLORADO

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/2/15	4. Name (Last, First): <u>SCANLON, MILDRED</u>
2. <u>Contribution Amt.</u> \$50.00	5. Address: <u>10300 TRUNDLE PLACE</u>
3. <u>Aggregate Amt. *</u> \$190.00	6. City/State/Zip: <u>MANASSAS, VA 20109</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>NONE</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> 7/25/15	4. Name (Last, First): <u>ULIBARRI, MARY</u>
2. <u>Contribution Amt.</u> \$3.00	5. Address: <u>10967 LIVINGSTON DR</u>
3. <u>Aggregate Amt. *</u> \$3.00	6. City/State/Zip: <u>NORTHGLENN, CO 80234</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 7/25/15	4. Name (Last, First): <u>SOLANO, PAUL</u>
2. <u>Contribution Amt.</u> \$20.00	5. Address: <u>6751 E. 60TH AVE</u>
3. <u>Aggregate Amt. *</u> \$20.00	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 9/9/15	4. Name (Last, First): <u>RANDALL, ROBERT</u>
2. <u>Contribution Amt.</u> \$20.00	5. Address: <u>10940 UNITY PARKWAY</u>
3. <u>Aggregate Amt. *</u> \$120.00	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>CITY AND COUNTY OF DENVER</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>ENGINEER</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: SCANLON FOR COLORADO

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 3/14/15	4. Name: <u>LYNX PRIDE SPIRIT STORE</u>
2. <u>Amount</u> \$50.00	5. Address: <u>10566 MEMPHIS ST</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
	7. Purpose of Expenditure: <u>BOOTH AT COMMUNITY ORGANIZATION FUN RUN</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 3/19/15	4. Name: <u>P & L PRINTING</u>
2. <u>Amount</u> \$94.59	5. Address: <u>2727 W 27TH AVE, UNIT D</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>DENVER, CO 80211</u>
	7. Purpose of Expenditure: <u>BUSINESS/CAMPAIGN CARDS</u> <input checked="" type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 4/6/15	4. Name: <u>ONLINE STORES</u>
2. <u>Amount</u> \$82.13	5. Address: <u>1000 WESTINGHOUSE DR, SUITE 1</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>NEW STANTON, PA 15672</u>
	7. Purpose of Expenditure: <u>4 X 6' STATE FLAGS, AND 1 US FLAG</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 5/8/15	4. Name: <u>STEPHANIES COFFEE SHOP</u>
2. <u>Amount</u> \$20.35	5. Address: <u>7691 BRIGHTON BLVD</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
	7. Purpose of Expenditure: <u>FOOD FOR MEETING WITH VOLUNTEER ADVISOR</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 4/22/15	4. Name: <u>HARMONY GARDENS INC</u>
2. <u>Amount</u> \$94.26	5. Address: <u>23203 E BROMLEY LANE</u>

Full Name of Committee/Person: SCANLON FOR COLORADO

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 5/20/15	4. Name: <u>ADAMS COUNTY DEMOCRATIC PARTY</u>
2. <u>Amount</u> \$200.00	5. Address: <u>7290 SAMUEL DR, SUITE 120</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>DENVER, CO 80221</u>
	7. Purpose of Expenditure: <u>CINCO DE MAYO FIESTA CELEBRATION TABLE</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 5/21/15	4. Name: <u>COLORADO DEMOCRATIC PARTY</u>
2. <u>Amount</u> \$100.00	5. Address: <u>789 SHERMAN ST, SUITE 110</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>DENVER, CO 80203</u>
	7. Purpose of Expenditure: <u>AQUIRE VOTER LIST FOR WARD IV</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 5/27/15	4. Name: <u>COURTNEY GUILDNER PHOTOGRAPHY</u>
2. <u>Amount</u> \$35.00	5. Address: <u>COURTNEYGUILDNERPHOTOGRAPHY.COM</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ON LINE</u>
	7. Purpose of Expenditure: <u>FAMILY PHOTO TO ADD TO CAMPAIGN LEAFLET</u> <input checked="" type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 6/17/15	4. Name: <u>STELLATO'S GROCERY & DELI</u>
2. <u>Amount</u> \$32.34	5. Address: <u>15550 E 103RD PL,</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
	7. Purpose of Expenditure: <u>FOOD FOR VOLUNTEERS</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 6/6/15	4. Name: <u>FEDEX OFFICE</u>
2. <u>AMOUNT:</u> \$103.06	5. Address: <u>3545 QUEBEC ST, SUITE 117</u>
	6. City/State/Zip: <u>DENVER, CO 80207</u>
	7. Purpose of Expenditure: <u>CAMPAIGN CARD STOCK</u>
	<input checked="" type="checkbox"/> Check box if Electioneering Communication

Full Name of Committee/Person: SCANLON FOR COLORADO

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 7/13/15	4. Name: <u>STAPLES</u>
2. <u>Amount</u> \$70.34	5. Address: <u>5150 W. 120TH AVE, SUITE 120</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>WESTMINSTER, CO 80020</u>
	7. Purpose of Expenditure: <u>PRINTER INK</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 7/20/15	4. Name: <u>KING SOOPERS</u>
2. <u>Amount</u> \$75.14	5. Address: <u>15051 E. 104TH AVE</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
	7. Purpose of Expenditure: <u>STAMPS, ENVELOPES, INK</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 6/16/15	4. Name: <u>P & L PRINTING</u>
2. <u>Amount</u> \$672.82	5. Address: <u>3827 STEELE ST, UNIT A</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>DENVER, CO 80205</u>
	7. Purpose of Expenditure: <u>PAMPHLETS FOR DISTRIBUTION</u>
	<input checked="" type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 7/3/15	4. Name: <u>P&L PRINTING</u>
2. <u>Amount</u> \$269.13	5. Address: <u>3827 STEELE ST, UNIT A</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>DENVER, CO 80205</u>
	7. Purpose of Expenditure: <u>HOLIDAY LABELS</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 8/15/15	4. Name: <u>__KING SOOPERS__</u>
2. <u>AMOUNT:</u> \$38.46	5. Address: <u>__15051 E 104TH AVE__</u>
	6. City/State/Zip: <u>__COMMERCE CITY, CO 80022__</u>
	7. Purpose of Expenditure: <u>__FOOD FOR FUND RAISER__</u>
	<input type="checkbox"/> Check box if Electioneering Communication

Full Name of Committee/Person: __SCANLON FOR COLORADO__

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 8/10/15	4. Name: <u>__HENDERSON POST OFFICE__</u>
2. <u>Amount</u> \$35.00	5. Address: <u>__12210 BRIGHTON RD__</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>__HENDERSON, CO 80640__</u>
	7. Purpose of Expenditure: <u>__STAMPS__</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 7/21/15	4. Name: <u>__YUM ASIAN FUSION AND SUSHI__</u>
2. <u>Amount</u> \$34.44	5. Address: <u>__18220 104TH AVE, SUITE 105__</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>__COMMERCE CITY CO 80022__</u>
	7. Purpose of Expenditure: <u>__FOOD FOR CONFERENCE WITH VOLUNTEER ADVISOR__</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 8/27/15	4. Name: <u>__YUM ASIAN FUSION AND SUSHI__</u>
2. <u>Amount</u> \$34.52	5. Address: <u>__18220 104TH AVE, SUITE 105__</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>__COMMERCE CITY CO 80022__</u>
	7. Purpose of Expenditure: <u>__FOOD FOR CONFERENCE WITH VOLUNTEER ADVISOR__</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 9/17/15	4. Name: <u>__YUM ASIAN FUSION AND SUSHI__</u>
2. <u>Amount</u> \$23.79	5. Address: <u>__18220 104TH AVE, SUITE 105__</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>__COMMERCE CITY, CO 80022__</u>
	7. Purpose of Expenditure: <u>__FOOD FOR CONFERENCE WITH VOLUNTEER ADVISOR__</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 9/21/15	4. Name: <u>P&L PRINTING</u>
2. <u>AMOUNT:</u> \$272.22	5. Address: <u>3827 STEELE ST, UNIT A</u>
	6. City/State/Zip: <u>DENVER, CO 80205</u>
	7. Purpose of Expenditure: <u>YARD SIGNS</u>
	<input checked="" type="checkbox"/> Check box if Electioneering Communication

Full Name of Committee/Person: SCANLON FOR COLORADO

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 9/28/15	4. Name: <u>OFFICE DEPOT</u>
2. <u>Amount</u> \$23.31	5. Address: <u>2433 PRAIRIE CENTER PARKWAY</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>ENVELOPES</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 6/9/15	4. Name: <u>JEFF HOPP</u>
2. <u>Amount</u> \$100.00	5. Address: <u>2485 E. LOUISIANA PL</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>AURORA, CO 80018</u>
	7. Purpose of Expenditure: <u>SOCIAL MEDIA CONSULTATION</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 3/31/15 thru 10/5/15	4. Name: <u>DEMOCRACY NOW</u>
2. <u>Amount</u> \$45.66	5. Address: <u>231 FRONT ST, SUITE 107</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>BROOKLYN, NY 11201</u>
	7. Purpose of Expenditure: <u>FEES FOR ON LINE TRACKING OF CONTRIBUTIONS (per contribution)</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____

Full Name	Address, City, State, Zip	Amount Guaranteed
Schedule D – Returned Contributions & Expenditures		

Full Name of Committee/Person: SCANLON FOR COLORADO

Returned Contributions

(Previously reported on Schedule A – Contributions accepted and then returned to donors)

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 7/25/15	4. Name (Last, First): <u> HERRERA, MONICA </u>
2. <u>Date Returned</u> 8/14/15	5. Address: <u> 9642 ADALAIDE </u>
3. <u>Amount</u> \$100.00	6. City/State/Zip: <u> HIGHLANDS RANCH, CO 80130 </u>
	7. Purpose: <u> TOLD COULD NOT ACCEPT \$100 CASH DONATION. ALTHOUGH COMMITTEE DOES NOT AGREE WITH THAT INTERPRETATION OF ARTICLE XXVIII, SECTION 3, (10), CONCERNING EXACTLY \$100, THE MONEY WAS RETURNED TO AVOID CONTROVERSY. </u>

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u> \$	6. City/State/Zip: _____
	7. Purpose: _____

Returned Expenditures

(Previously reported on Schedule B – Expenditures returned or refunded to the committee)

PLEASE PRINT/TYPE

1. <u>Date Expended</u>	4. Name (Last, First): <u> NONE </u>
2. <u>Date Returned</u>	5. Address: _____

3. <u>Amount</u> \$	6. City/State/Zip: _____ 7. Comment (Optional): _____
------------------------	--

1. <u>Date Expended</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____

3. <u>Amount</u> \$	Statement of Non-Monetary Contributions [Art. XXVIII, Sec. 2(5)(a)(II)(III) & Sec. 5(3) & 1-45-108(1), C.R.S.]
------------------------	--

Full Name of Committee/Person: SCANLON FOR COLORADO

PLEASE PRINT/TYPE

1. <u>Date Provided</u> 3/8/15	4. Name (Last, First): <u>NELSON, MARY</u>
2. <u>Fair Market Value</u> \$72.46	5. Address: <u>4316 COTSWOLDS HILL LANE</u>
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: <u>FAIRFAX, VA 22030</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PRINTER INK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____
	10. x <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. <u>Date Provided</u> 6/18/15	4. Name (Last, First): <u>MOOTZ, CLAIRE</u>
2. <u>Fair Market Value</u> \$70.00	5. Address: <u>10801 CHAMBERS WAY</u>
3. <u>Aggregate Amt.</u> \$120.00	6. City/State/Zip: <u>COMMERCE CITY, CO 80022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>FOOD, REFRESHMENTS AND FLORAL FOR FUND-RAISER AND CAMPAIGN VOLUNTEERS</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>NONE</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>
	10. x <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. <u>Date Provided</u> 4/17/15	4. Name (Last, First): <u>SCANLON, SABINE</u>
------------------------------------	---

2. <u>Fair Market Value</u> \$63.00	5. Address: _____ 10635 NUCLA ST _____
3. <u>Aggregate Amt.</u> \$63.00	6. City/State/Zip: _____ COMMERCE CITY, CO 80022 _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____ FOOD AND REFRESHMENTS FOR CAMPAIGN KICK OFF EVENT _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____
	10. <input checked="" type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

* Note: If coordinated, then contribution must also be reported as a non-monetary expenditure on Detailed Summary. Art. XXVIII, Sec. 2(9) states: "... Expenditures that are controlled by or coordinated with a candidate or candidate's agent are deemed to be both contributions by the maker of the expenditures, and expenditures by the candidate committee."