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Colorado Secretary of State  
Elections Division  
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Denver, CO 80290  
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**REPORT OF CONTRIBUTIONS AND EXPENDITURES**  
(1-45-108, C.R.S.)

Full Name of Committee/Person: EPRECALL-2019

As Shown On Registration

Address of Committee/Person: 1926 STONEGATE DRIVE ESTES PARK, CO 80517

City, State & Zip Code: \_\_\_\_\_

Committee Type: ISSUES

Name and Address of Financial Institution: FRONTIER BANK, LAMAR, CO 81052

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: 7.15.2019 Date Through 7.30.2019 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)	\$ <u>0</u>
2 Total Monetary Contributions (line 11)	\$ <u>2378.29</u>
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ <u>2378.29</u>
4 Total Monetary Expenditures (line 19)	\$ <u>531.00</u>
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ <u>1847.29</u>

**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: JANET GEHLHAUSEN

Registered Agent's Signature: Janet Gehlhausen Date: 7.30.19

Print Candidate Name: \_\_\_\_\_

Candidates Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DETAILED SUMMARY**

Full Name of Committee/Person: EPRECALL-2019

Current Reporting Period: 7.15.2019 Through 7.30.2019

	<b>Funds on hand at the beginning of reporting period</b> (Monetary Only)	\$ 0
6	<b>Itemized Contributions \$20 or More</b> [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ see attached 2318.29
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$ \$60.00 donation bowl cash
8	<b>Loans Received</b> (Please list on Schedule "C")	\$ none
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$ none
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$ none
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$ 2378.29
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$ 259.51
13	<b>Total Contributions</b> (Line 11 + line 12)	\$ 2637.80
14	<b>Itemized Expenditures \$20 or More</b> [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 531.00
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$ <del>          </del> /
16	<b>Loan Repayments Made</b> (Please list on Schedule "C")	\$ /
17	<b>Returned Contributions (To donor)</b> (Please list on Schedule "D")	\$ /
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$ /
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$ 531.00
20	<b>Total Spending</b> (Line 18 + line 19)	\$ 531.00

**Schedule A – Itemized Contributions Statement (\$20 or more)**  
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: EP RECALL-2019

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 7.16.2019	4. Name (Last, First): <u>please see attached</u>
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> ): _____

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).

100

Deb Dufty GFM

25

John Gehlhausen 500 ck

120.77

Dianna Hulbert GFM\*

GFM Deposit

Jack Nicholson & Paulette Harp 25 ck 1807 Maple st. Ellis, KS 67637

Don Sellers 100 ck 490 Prospector Ln, EP

Donna & David Pierce 50 ck 333 Prospect Mt. Ct., EP

Romaine & Jane Gardner 100 ck 1810 Ptarmigan Trl, EP

Paula Edwards 75 ck PO Box 824, EP

??? 60 cash

Daylene Bennett 500 ck 1732 Devils Gulch Rd, EP

Susan Day 25 ck 1763 Wildfire Rd, EP

Richard & Janet Taylor 50 ck 734 Black Canyon Dr., EP

Anne Hulbert 200 ck 734 Meadowview Dr., EP

Total July 16 1685 120.77 Grand Total = 1805.77

Mary Sampson GFM\*

GFM Deposit 72.52

Reimburse...Donna Pierce EP News Ad

Beth & Phil Nicholson 500 ck 3024 8th St., Boulder, CO 80304

Total July 27 2185 193.29 Grand Total = 2378.29

\$ 2866.00

Total funds available 7/27 minus ad = 2092.29

\* GO FUND ME PAGE

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

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

Full Name of Committee/Person: EPRECALL-2019

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 7.19.2019	4. Name: <u>JANET GEHLHAUSEN</u>
2. <u>Amount</u> \$ <u>245.00</u>	5. Address: <u>1926 STONEGATE DRIVE</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ESTES PARK CO 80517</u>
	7. Purpose of Expenditure: <u>stamps (reimbursed)</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 7.22.2019	4. Name: <u>DONNA PIERCE</u>
2. <u>Amount</u> \$ <u>286.00</u>	5. Address: <u>333 PROSPECT MOUNTAIN CT.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ESTES PARK, CO 80517</u>
	7. Purpose of Expenditure: <u>ad in Estes Park News (reimbursement)</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

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

**Schedule C - Loans**

Full Name of Committee/Person: EPRECALL-2019

**LOANS - Loans Owed by the Committee**

(Use a separate schedule for each loan. This form is for line item 8 and 16 of the Detailed Summary Report.)  
[No information copied from such reports shall be sold or used by any person for the purpose of soliciting contributions or for any commercial purpose. [Art. XXVIII, Sec. 9(e)] Notwithstanding any other section of this article to the contrary, a candidate's candidate committee may receive a loan from a financial institution organized under state or federal law if the loan bears the usual and customary interest rate, is made on a basis that assures repayment, is evidenced by a written instrument, and is subject to a due date or amortization schedule [Art. XXVIII, Sec. 3(8)]

**LOAN SOURCE**

none

Name (Last, First or Institution): \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Original Amount of Loan: \$ \_\_\_\_\_ Interest Rate: \_\_\_\_\_

Loan Amount Received This Reporting Period: \$ \_\_\_\_\_

Total of All Loans This Reporting Period: \$ \_\_\_\_\_  
(Place on line 8 of Detailed Summary Report)

Principal Amount Paid This Reporting Period: \$ \_\_\_\_\_

Interest Amount Paid This Reporting Period: \$ \_\_\_\_\_

Amount Repaid This Reporting Period: \$ \_\_\_\_\_  
(Amount Repaid is sum of Principal & Interest entered on Detail Summary)

Total Repayments Made: \$ \_\_\_\_\_  
(Sum of Schedule C pages, Place on line 16 of Detailed Summary)

Outstanding Balance: \$ \_\_\_\_\_

TERMS OF LOAN: \_\_\_\_\_  
Date Loan Received \_\_\_\_\_ Due Date for Final Payment \_\_\_\_\_

**LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN**

Full Name	Address, City, State, Zip	Amount Guaranteed

**Schedule D – Returned Contributions & Expenditures**

**Full Name of Committee/Person:** EP RECALL-2019

**Returned Contributions**

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

**PLEASE PRINT/TYPE**

*none*

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: _____

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**

*none*

1. <u>Date Expended</u>	4. Name (Last, First): _____
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>	6. City/State/Zip: _____
\$	7. Comment (Optional): _____

**Statement of Non-Monetary Contributions** IN KIND  
 [Art. XXVIII, Sec. 2(5)(a)(II)(III) & Sec. 5(3) & 1-45-108(1), C.R.S.]

Full Name of Committee/Person: EP RECALL - 2019

PLEASE PRINT/TYPE

1. Date Provided <u>7.16.2019</u>	4. Name (Last, First): <u>JANET GEHLHAUSEN</u>
2. Fair Market Value \$ <u>2528</u>	5. Address: <u>1926 STONE GATE DRIVE</u>
3. Aggregate Amt. \$ <u>2528</u>	6. City/State/Zip: <u>ESTES PARK, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>mailing labels -</u>
	8. Employer (if applicable, mandatory): <u>self Gehlhausen Rentals and T+G Enterprises</u>
	9. Occupation (if applicable, mandatory): <u>property</u>
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. Date Provided <u>7.15.2019</u>	4. Name (Last, First): <u>DENA &amp; DENNIS SCHOCKI</u>
2. Fair Market Value \$ <u>234.23</u>	5. Address: <u>1900 GRAY HAWK COURT</u>
3. Aggregate Amt. \$ <u>234.23</u>	6. City/State/Zip: <u>ESTES PARK, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>printed post cards</u>
	8. Employer (if applicable, mandatory): <u>self</u>
	9. Occupation (if applicable, mandatory): <u>artists</u>
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

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