

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



Space Below For Office Use Only

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

**Full Name of Committee/Person:** Wendy A Mayor - Chuck Levine  
As Shown On Registration

**Address of Committee/Person:** 408 Bristlecone Ct

**City, State & Zip Code:** Estes Park, CO 80517

**Committee Type:**

**Name and Address of Financial Institution:** Bank of Colorado 533 Big Thompson

**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:** 3/17/2020 Date Through 4/2/2020 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)	\$ 686.97
2	Total Monetary Contributions (line 11)	\$ 730.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 1416.97
4	Total Monetary Expenditures (line 19)	\$ 0
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 1416.97

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: Chuck Levine  
 Registered Agent's Signature: *Chuck Levine* Date: 4/2/2020  
 Print Candidate Name: Wendy Hoenig  
 Candidates Signature: *Wendy Hoenig* Date: 4-2-20

**DETAILED SUMMARY**

Full Name of Committee/Person: Chuck Levine

Current Reporting Period: 3/17/2020 Through 4/2/2020

	<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>	\$	686.97
6	<b>Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "A")	\$	730.00
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$	
8	<b>Loans Received</b> (Please list on Schedule "C")	\$	
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$	
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$	
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$	730.00
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$	1800.00
13	<b>Total Contributions</b> (Line 11 + line 12)	\$	2530.00
14	<b>Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "B")	\$	—
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$	—
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)	\$	—
20	<b>Total Spending</b> (Line 18 + line 19)	\$	0

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

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

Full Name of Committee/Person: Wendy A Mayor

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

PLEASE PRINT/TYPE

1. Date Accepted <u>3/18/2020</u>	4. Name (Last, First): <u>Howell, Bill and Judy</u>
2. Contribution Amt. \$ <u>60.00</u>	5. Address: <u>3025 Souix Ct.</u>
3. Aggregate Amt. * \$ <u>60.00</u>	6. City/State/Zip: <u>Estes Park, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Cash</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>3/19/2020</u>	4. Name (Last, First): <u>Fridrich, John</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>1776 Olympian Ln. Unit D</u>
3. Aggregate Amt. * \$ <u>50.00</u>	6. City/State/Zip: <u>Estes Park, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>3/26/2020</u>	4. Name (Last, First): <u>Newsome, Wayne and Pat</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>PO Box 2812</u>
3. Aggregate Amt. * \$ <u>100.00</u>	6. City/State/Zip: <u>Estes Park, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>3/31/2020</u>	4. Name (Last, First): <u>Adair, Joe and MaryLiz</u>
2. Contribution Amt. \$ <u>20.00</u>	5. Address: <u>PO Box 2150</u>
3. Aggregate Amt. * \$ <u>20.00</u>	6. City/State/Zip: <u>Estes Park, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

\* 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: Wendy A Mayor

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 3/31/2020	4. Name (Last, First): <u>Higley, Bob and Christann</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>751 Longs Dr</u>
3. <u>Aggregate Amt. *</u> \$ 500.00	6. City/State/Zip: <u>Estes Park, CO 80577</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. 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: Wendy A Mayor

PLEASE PRINT/TYPE

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

NONE

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

**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:** Wendy A Mayor

**PLEASE PRINT/TYPE**

1. <u>Date Provided</u> 1/15/2020 - 4/10/2020	4. Name (Last, First): <u>Palmosano, Jamie</u>
2. <u>Fair Market Value</u> \$ 1800.00	5. Address: <u>755 Elm Road #8</u>
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: <u>Estes Park, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Marketing and promotion</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>Brown Fields</u>
	9. Occupation (if applicable, <u>mandatory</u> ): <u>Manager</u>
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</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> ): _____
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</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> ): _____
	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."

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



Space Below For Office Use Only

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

<b>Full Name of Committee/Person:</b>	Wendy A Mayer As Shown On Registration	Chuck Levine TREASURER
<b>Address of Committee/Person:</b>	408 Bristlacone Ct	
<b>City, State &amp; Zip Code:</b>	Estes Park, CO 80517	
<b>Committee Type:</b>		
<b>Name and Address of Financial Institution</b>	Bank of Colorado 533 Brg Thompson	

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
2 Total Monetary Contributions (line 11)	\$ 5,370.81
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 5,370.81
4 Total Monetary Expenditures (line 19)	\$ 4,683.84
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 686.97

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: Charles R. Levine  
 Registered Agent's Signature: Chal R. Levine Date: 3/16/2020  
 Print Candidate Name: Wendy Koenig  
 Candidates Signature: Wendy Koenig Date: 3/16/2020

**DETAILED SUMMARY**

Full Name of Committee/Person: Chuck Levine

Current Reporting Period:  Through 3/16/2020

	<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>	\$ $\phi$
6	<b>Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "A")	\$ 5,370.81
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$
8	<b>Loans Received</b> (Please list on Schedule "C")	\$
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$ 5,370.81
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$
13	<b>Total Contributions</b> (Line 11 + line 12)	\$
14	<b>Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "B")	\$ 4,683.84
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$
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)	\$ 4,683.84
20	<b>Total Spending</b> (Line 18 + line 19)	\$ 4,683.84



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

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

Full Name of Committee/Person: Wendy A Mayor

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

PLEASE PRINT/TYPE

1. Date Accepted <u>1/31/2020</u>	4. Name (Last, First): <u>Levine, Chuck</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>408 Bristlecone Ct</u>
3. Aggregate Amt. * \$ <u>100.00</u>	6. City/State/Zip: <u>Estes Park, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>cash</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>2/4/2020</u>	4. Name (Last, First): <u>Martin, Randy</u>
2. Contribution Amt. \$ <u>500.00</u>	5. Address: <u>PO Box 4528</u>
3. Aggregate Amt. * \$ <u>500.00</u>	6. City/State/Zip: <u>Estes Park, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check # 4051</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>2/11/2020</u>	4. Name (Last, First): <u>Churchill, RW</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>PO Box 2263</u>
3. Aggregate Amt. * \$ <u>50.00</u>	6. City/State/Zip: <u>Estes Park, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>2/17/2020</u>	4. Name (Last, First): <u>Bergeron, Jerry</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>910 SW Palm Cove Dr.</u>
3. Aggregate Amt. * \$ <u>100.00</u>	6. City/State/Zip: <u>Palm City, FL 34990</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

\* 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: Wendy A Mayor

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

PLEASE PRINT/TYPE

1. Date Accepted <u>2/17/2020</u>	4. Name (Last, First): <u>Brownfield, Gerald</u>
2. Contribution Amt. \$ <u>250.00</u>	5. Address: <u>PO Box 250</u>
3. Aggregate Amt. * \$ <u>250.00</u>	6. City/State/Zip: <u>Estes Park, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>2/27/2020</u>	4. Name (Last, First): <u>Foster, Robert</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>PO Box 1981</u>
3. Aggregate Amt. * \$ <u>100.00</u>	6. City/State/Zip: <u>Estes Park, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>2/27/2020</u>	4. Name (Last, First): <u>Gigax, Danny and Judy</u>
2. Contribution Amt. \$ <u>500.00</u>	5. Address: <u>2091 Uplands Cr.</u>
3. Aggregate Amt. * \$ <u>500.00</u>	6. City/State/Zip: <u>Estes Park, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>3/2/2020</u>	4. Name (Last, First): <u>Hondius, Pieter and Helen</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>PO Box 1723</u>
3. Aggregate Amt. * \$ <u>100.00</u>	6. City/State/Zip: <u>Estes Park, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

\* 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: Wendy A Mayor

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 3/3/2020	4. Name (Last, First): <u>Kundtz, Mary Ann</u>
2. <u>Contribution Amt.</u> \$ 300.00	5. Address: <u>1708 Ptarmigan Tr</u>
3. <u>Aggregate Amt. *</u> \$ 300.00	6. City/State/Zip: <u>Estes Park, CO 80517</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> 3/3/2020	4. Name (Last, First): <u>Lynch, John and Peggy</u>
2. <u>Contribution Amt.</u> \$ 300.00	5. Address: <u>PO Box 2736</u>
3. <u>Aggregate Amt. *</u> \$ 300.00	6. City/State/Zip: <u>Estes Park, CO 80517</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> 3/3/2020	4. Name (Last, First): <u>Ellingson, Ed and Colleen</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>926 <del>THE</del> Village Green Ln.</u>
3. <u>Aggregate Amt. *</u> \$ 50.00	6. City/State/Zip: <u>Estes Park, CO 80517</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> 3/11/2020	4. Name (Last, First): <u>Downey, Dona both</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>706 Tanager Rd.</u>
3. <u>Aggregate Amt. *</u> \$ 100.00	6. City/State/Zip: <u>Estes Park, CO 80517</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: Wendy A Mayor

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>3/13/2020</u>	4. Name (Last, First): <u>Sweet, William and Nancy</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>PO Box 2573</u>
3. <u>Aggregate Amt. *</u> \$ <u>500.00</u>	6. City/State/Zip: <u>Estes Park, CO 80517</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> <u>Various</u>	4. Name (Last, First): <u>Schwett, Wendy Koenig</u>
2. <u>Contribution Amt.</u> \$ _____	5. Address: <u>1212 Brook Dr</u>
3. <u>Aggregate Amt. *</u> \$ <u>2420.81</u>	6. City/State/Zip: <u>Estes Park, CO 80517</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u><del>Money</del> Check</u>
	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: Wendy A Mayor

PLEASE PRINT/TYPE

1. Date Expended <u>2/11/2020</u>	4. Name: <u>Hobert Office Systems</u>
2. Amount \$ <u>236.42</u>	5. Address: <u>1140 Mansford Ste A</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>Signs</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>2/12/2020</u>	4. Name: <u>Hobert Office Systems</u>
2. Amount \$ <u>79.35</u>	5. Address: <u>1140 Mansford Ste A</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>Cards (Business)</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>2/16/2020</u>	4. Name: <u>Hobert Office Systems</u>
2. Amount \$ <u>108.70</u>	5. Address: <u>1140 Mansford Ste A</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>Yard Signs</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>2/24/2020</u>	4. Name: <u>Hobert Office Systems</u>
2. Amount \$ <u>179.36</u>	5. Address: <u>1140 Mansford Ste A</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>Yard Signs</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>2/24/2020</u>	4. Name: <u>Estes Park News</u>
2. Amount \$ <u>143.20</u>	5. Address: <u>PO Box 508</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>Advertising</u> <input type="checkbox"/> Check box if Electioneering Communication

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

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

Full Name of Committee/Person: Wendy A Mayor

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>3/3/2020</u>	4. Name: <u>Estes Park News</u>
2. <u>Amount</u> \$ <u>716.00</u>	5. Address: <u>PO Box 508</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>Advertising</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>3/3/2020</u>	4. Name: <u>Prarie Mountain Media</u>
2. <u>Amount</u> \$ <u>680.00</u>	5. Address: <u>PO Box 62000</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs, CO 80962</u>
	7. Purpose of Expenditure: <u>Advertising (EP Trail)</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>3/11/2020</u>	4. Name: <u>Hobert Office Systems</u>
2. <u>Amount</u> \$ <u>2,538.81</u>	5. Address: <u>1140 Manford Ste A</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>Mailer - tri. sold</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