



RECEIVED
By Lisa Anderson at 2:22 pm, Oct 30, 2020

REPORT OF CONTRIBUTIONS AND EXPENDITURES

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

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

CANDIDATE OR COMMITTEE NAME:

Desiree LaFleur District 4

Registered Agent: Desiree LaFleur

Phone Number: 720-394-6433

Email Address: desiree@finnlafleur.com

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

Name of Committee's Bank: Wells Fargo

- Regularly Scheduled Filing
Amended Filing. This amends previous report filed on
Termination Report (Termination Reports MUST Have a Zero Balance)

REPORTING PERIOD - Beginning Date: 10/19/20 Ending Date: 10/25/20

Table with 2 columns: Description and Amount. Rows include BEGINNING BALANCE (\$350.77), Contributions (+) (\$500.00), Contributions In Kind (+) (\$), Loans (+) (\$), Expenditures/Expenditures In-Kind (-) (\$1.64), and ENDING BALANCE (\$849.13).

Totals must match attached detailed reports.

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

Registered Agent's Name: Desiree LaFleur

Registered Agent's Signature: Desiree A. LaFleur Date: 10/30/20

If Applicable

Candidate Name: Desiree LaFleur

Candidates Signature: Desiree A. LaFleur Date: 10/30/20

Detailed Report of CONTRIBUTIONS

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

Name of Committee: Desiree LaFleur District 4

<u>Date Accepted:</u> <u>10/28/20</u> Amount: <u>\$ 500.00</u>	NAME (First, Last): <u>Mike Rea</u> Address: <u>11273 Decatur Circle</u> City/State/Zip: <u>Westminster, CO 80234</u>
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> \$ _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____

Detailed Report of EXPENDITURES

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

Name of Committee: _____

<u>Date Expended:</u> 10/27/20 Amount: \$ 1.64	PAYABLE TO: <u>Facebook</u> Address: _____ City/State/Zip: _____ Purpose/Description: <u>social media ad</u>
<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____
<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____
<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____

~ATTACH RECEIPTS FOR EXPENDITURES OVER \$100~

Detailed Report of CONTRIBUTIONS IN KIND

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

Name of Committee: _____

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

Detailed Report of LOANS

Name of Committee: _____

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