Colorado Secretary of State
Elections Division
1700 Broadway, Ste. 200
Denver, CO 80290
Ph: (303) 894-2200 dial 3
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 EXPENDITURE

	rado Constitution and Tital 1, Article 45 of the Co	iorado Revised Statute (C.R.S.)
Full Name of Committee/Person:	Michael A. Evans	For Trustee
Address of Committee/Person:	As Shown On Registration  435 Pierca. 57.	
City, State & Zip Code:	150 Fierca St.	
Committee Type:	Erie, Co 80516	
Name and Address of Financial Institution	Great Wostern Bank	785-04000 EL F.
COMMITTEE ID	NUMBER	COO Cheeseman IT. Cri
Type of Report		
	ds previous report filed on (date) ion ONLY nation Reports MUST Have a Monetary Balance of the Contains Electioneering Communication and the Date  Through The Contains Election and Through The Contains Election and Through	
[Art. XXVIII, Sec. 4(1)]	sicable) \$	
	of Daniel' Dist	Totals Detailed Summary Page
Funds on Hand at the Reginning		
	of Reporting Period (monetary only)	\$ 50.00
2   Total Monetary Contributions (lin	e.11)	\$210-00
Total Monetary Contributions (ling) Total of Monetary Contributions	e 11) & Beginning Amount (line 1 + line 2)	\$260.00
<ul> <li>Total Monetary Contributions (ling)</li> <li>Total of Monetary Contributions (ling)</li> <li>Total Monetary Expenditures (ling)</li> </ul>	& Beginning Amount (line 1 + line 2)	\$210-00 \$260.00 \$248.70
Total Monetary Contributions (line Total of Monetary Expenditures (line Funds on Hand at the End of Report Funds on Hand	& Beginning Amount (line 1 + line 2) 2: 19) orting Period (monetary) (line 3 – line 4)	\$210-00 \$260.00 \$248.70 \$ 11.30
Total Monetary Contributions (ling Total of Monetary Contributions of Total Monetary Expenditures (line Funds on Hand at the End of Report The appropriate officer shapes)	& Beginning Amount (line 1 + line 2)  2 19) orting Period (monetary) (line 3 – line 4)  all impose a penalty of \$50 per day for each [Art. XXVIII Sec. 10(2)(a)]	\$210-00 \$260.00 \$248.70 \$ 11.30 h day that a report is filed late.
Total Monetary Contributions (line) Total of Monetary Contributions of Total Monetary Expenditures (line) Funds on Hand at the End of Reportation (Must be completed by penalty of perjury, that to the best of mincluding any contributions received in permissible sources.	& Beginning Amount (line 1 + line 2)  2 19) Orting Period (monetary) (line 3 – line 4)  all impose a penalty of \$50 per day for each [Art. XXVIII Sec. 10(2)(a)]  y either the Registered Agent OR the Candidate): y knowledge or belief all contributions receive to the form of membership dues transferred by	\$210-00 \$248.70 \$248.70 \$11.30 h day that a report is filed late.  I hereby certify and declare, under wed during this reporting period, a membership organization, are from
Total Monetary Contributions (line Total of Monetary Expenditures (line Funds on Hand at the End of Report The appropriate officer shadow)  Authorization (Must be completed by penalty of perjury, that to the best of maincluding any contributions received in permissible sources.  Print Registered Agent's Name:	& Beginning Amount (line 1 + line 2)  2 19)  orting Period (monetary) (line 3 – line 4)  all impose a penalty of \$50 per day for each  [Art. XXVIII Sec. 10(2)(a)]  y either the Registered Agent OR the Candidate): y knowledge or belief all contributions received the form of membership dues transferred by	\$210-00 \$248.70 \$248.70 \$11.30 h day that a report is filed late.  I hereby certify and declare, under wed during this reporting period, a membership organization, are from
Total Monetary Contributions (line Total of Monetary Contributions of Total Monetary Expenditures (line Funds on Hand at the End of Report The appropriate officer shade)  Authorization (Must be completed by penalty of perjury, that to the best of mincluding any contributions received in permissible sources.  Print Registered Agent's Name:  Registered Agent's Signature:	& Beginning Amount (line 1 + line 2)  2 19) orting Period (monetary) (line 3 – line 4)  all impose a penalty of \$50 per day for each [Art. XXVIII Sec. 10(2)(a)]  y either the Registered Agent OR the Candidate): by knowledge or belief all contributions receive the form of membership dues transferred by	\$210-00 \$248.70 \$248.70 \$11.30  The day that a report is filed late.  Thereby certify and declare, under yed during this reporting period, a membership organization, are from
Total Monetary Contributions (line Total of Monetary Contributions of Total Monetary Expenditures (line Funds on Hand at the End of Report The appropriate officer shade)  Authorization (Must be completed by penalty of perjury, that to the best of mincluding any contributions received in permissible sources.  Print Registered Agent's Name:  Registered Agent's Signature:	& Beginning Amount (line 1 + line 2)  2 19)  orting Period (monetary) (line 3 – line 4)  all impose a penalty of \$50 per day for each  [Art. XXVIII Sec. 10(2)(a)]  y either the Registered Agent OR the Candidate): y knowledge or belief all contributions received the form of membership dues transferred by	\$210-00 \$248.70 \$248.70 \$11.30  The day that a report is filed late.  Thereby certify and declare, under yed during this reporting period, a membership organization, are from

Colorado Secretary of State Form Rev. 07/2016

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

]

Full Name of Committee/Person:

Michael	1 /	Evans	For	Truster
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## WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/	ГҮРЕ
1. Date Accepted	4. Name (Last, First): Evans Michael
2.2.18	5. Address: 435 Pierce 54.
2. Contribution Amt.	
3. Aggregate Amt. *	6. City/State/Zip: Enie Co 805-16
\$	7. Description: Personal Dona town
Check box if	8. Employer (if applicable, mandatory):
Electioneering	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	4. Name (Last, First): Olocki, Dana a John
2.9.18 2. Contribution Amt.	5. Address: 1649 Bary Dr.
\$ 100.00	6. City/State/Zip: Erie, Co 80516
3. Aggregate Amt. *	7. Description: Personal Donation
\$	
Check box if	8. Employer (if applicable, mandatory):
Electioneering Communication	9. Occupation (if applicable, mandatory):
1. Date Accepted	
2.9.18	4. Name (Last, First): <u>Evaus</u> Michael
2. Contribution Amt.	5. Address: 435 Pierce 54.
\$ 20.00	6. City/State/Zip: Eve Co 80516
3. Aggregate Amt. *	7. Description: Personal Donation
	8. Employer (if applicable, mandatory):
Check box if Electioneering	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	4. Name (Last, First): Evang Michael
2.15-18	
2. Contribution Amt.	5. Address: 435 Pierce 54.
50.00 3. Aggregate Amt. *	6. City/State/Zip: Eric Co 80516 7. Description: Personal Donation
\$	
	8. Employer (if applicable, mandatory):
\$ Check box if Electioneering Communication	

\* 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).

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

]

Full Name of Committee/Person:	Miller	A. Evans	For	Trustee	

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

PLEASE PRINT/	ГҮРЕ
1. Date Accepted	4. Name (Last, First): Evans, Michael
3.2.18	
2. Con ribution Amt.	
<sup>4</sup> 40,60  3. Aggregate Amt. *	6. City/State/Zip: Enie, Co 80516
\$	7. Description: Personal Donation
Check box if	8. Employer (if applicable, mandatory):
Electio reering Communication	9. Occupation (if applicable, mandatory):
1. Date Accepted	
	4. Name (Last, First):
2. Con ribution Amt.	5. Address:
\$	6. City/State/Zip:
3. Aggregate Amt. * \$	7. Description:
	8. Employer (if applicable, mandatory):
Check box if Election eering	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	
	4. Name (Last, First):
2. Con ribution Amt.	4. Name (Last, First):  5. Address:
2. Con ribution Amt.	5. Address:
\$ 3. Agg egate Amt. *	5. Address: 6. City/State/Zip:
\$ 3. Agg egate Amt. * \$	5. Address:
\$ 3. Agg egate Amt. *	5. Address: 6. City/State/Zip: 7. Description:
\$ 3. Age regate Amt. * \$ Che sk box if	5. Address:
\$ 3. Agg regate Amt. * \$ Che k box if Electio reering	5. Address:
\$ 3. Age regate Amt. * \$ Check box if Electioneering Communication	5. Address:
\$ 3. Agg regate Amt. * \$ Che sk box if Electioneering Communication  1. Data Accepted	5. Address:
\$ 3. Age regate Amt. * \$ Che is box if Electioneering Communication  1. Data Accepted  2. Con ribution Amt. \$ 3. Age regate Amt. *	5. Address:
\$ 3. Agg egate Amt. * \$ Che k box if Electio reering Communication  1. Data Accepted  2. Con ribution Amt. \$ 3. Agg egate Amt. * \$	5. Address:
\$ 3. Age regate Amt. * \$ Che is box if Electioneering Communication  1. Data Accepted  2. Con ribution Amt. \$ 3. Age regate Amt. *	5. Address:  6. City/State/Zip:  7. Description:  8. Employer (if applicable, mandatory):  9. Occupation (if applicable, mandatory):  4. Name (Last, First):  5. Address:  6. City/State/Zip:  7. Description:

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

### DETAILED SUMMARY

Full Name of Committee/Person: Michael A. Evans for Trustee

**Current Reporting Period:** 

Feb 2, 2018

Through March 13, 2018

Fund	is on hand at the beginning of reporting period (Monetary Only)	\$ 50.00
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "A")	\$ 50.00 \$ 210.00 \$ \$
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 6
3	Loans Received (From Schedule "C")	\$ 6
()	Total of Other Receipts (Interest, Dividends, etc.)	\$ 0
0	Returned Expenditures (from recipient) (From Schedule "D")	\$ 6
1	Total Monetary Contributions (Total of lines 6 through 10)	\$260.00
2	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 0
3	Total Contributions (Line 11 + line 12)	\$ 260-00
4	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$ 260-00 \$ 248.70
5	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$
6	Loan Repayments Made (From Schedule "C")	\$ 0
7	Returned Contributions (To donor) (Please list on Schedule "D")	\$ 0
8	Total Coordinated Non-Monetary (in-kind) Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ 0
9	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 298.70
20	Total Spending (Line 18 + line 19)	\$ 248.70

# 

Full Name of Committee	ee/Person: Michael A. Evans for Tourte
PLEASE PRINT/TYPE	
1. Date Expended	11 7 0 111 1
2.20.15	4. Name: Net Brands Media
2-20-18 2. <u>Amount</u>	5. Address: 14550 Beechnut 5+.
\$ 192.08	6. City/State/Zip: Houston TX 77083
3.Recipient is (optional):  Committee	7. Purpose of Expenditure: Yard Tigns
Non-Committee	
	Lheck box if Electioneering Communication
1. Date Expended	4. Name: Morrell Printing Solutions
2. <u>Amount</u>	5. Address: 990 South Public Rd UnitC
\$ 25.16	6. City/State/Zip: La fagette Co 80026
3.Recipient is (optional):  Committee	7. Purpose of Expenditure: Handowt flyers
Non-Committee	/ · · · · · · · · · · · · · · · · · · ·
	Check box if Electioneering Communication
1. Date Expended	4. Name: Morrell Printing Solutions
3. J. 18 2. Amount	
2. Attiouit	5. Address: 990 South Public Rd UnitC
\$ 31.46 3.Recipient is (optional):	6. City/State/Zip: La Tayette, Co 80026
Committee	7. Purpose of Expenditure: Handaut Flyers
Non-Committee	Check box if Electioneering Communication
	Check box it Electioneeting Communication
1. Date Expended	4. Name:
2. Amount	5. Address:
\$	6. City/State/Zip:
3.Recipient is (optional):  Committee	7. Purpose of Expenditure:
Non-Committee	
	Check box if Electioneering Communication
1 <u>Date Expended</u>	4. Name:
2. Amount	5. Address:
\$	6. City/State/Zip:
3.Recipient is (optional):  Committee	7. Purpose of Expenditure:
Non-Committee	
r.on Committee	Check box if Electioneering Communication

#### Schedule C - Loans

**Candidate Committees only** 

Full Name of Committee/Person: Michael Atures for Trustee

#### 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	
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)	
Outstanding Balance: \$	
TERMS OF LOAN:  Date Loan	n Received Due Date for Final Payment

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

Full Name	Address, City, State, Zip	Amount Guaranteed
NA		

## Schedule D – Returned Contributions & Expenditures

	$M \mid I \mid I =$	19
Full Name of Committee/Person:	Michael A.Cu	ans for rustre

#### **Returned Contributions**

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

4. Name (Last, First):

PLEASE PRINT/TYPE 1. Date Accepted

2. Date Returned

2. <u>Date Returned</u>	5. Address:
3. Amount	6. City/State/Zip:
\$	7. Purpose:
1. Date Accepted	4. Name (Last, First):/A
2. Date Returned	5. Address:
3. Amount	6. City/State/Zip:
\$	7. Purpose:
(Previous) PLEASE PRINT/TYPE  1. Date Expended	ly reported on Schedule B – Expenditures returned or refunded to the committee)
PLEASE PRINT/TYPE	
	4. Name (Last, First):
2. Date Returned	5. Address:
3. Amount	
	6. City/State/Zip:
\$	6. City/State/Zip:  7. Comment (Optional):
1. Date Expended	7. Comment (Optional):
	7. Comment (Optional):
1. <u>Date Expended</u>	7. Comment (Optional):
Date Expended     Date Returned	7. Comment (Optional):  4. Name (Last, First):  5. Address:

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 Com	mittee/Person: Michael A. Evans For Trustee
PLEASE PRINT/TYPE	
1. Date Provided	4. Name (Last, First):
2. Fair Market Value	5. Address:
3. Aggregate Amt.	7. Description:
\$ Check box if	8. Employer (if applicable, mandatory):  9. Occupation (if applicable, mandatory):
Electioneering Communication	10. 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:
\$	8. Employer (if applicable, <u>mandatory</u> ):
Check box if Electioneering Communication	9. Occupation (if applicable, mandatory):  10. Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *
	10
1. Date Provided	4. Name (Last, First):
2. Fair Market Value	5. Address:
\$ 3. Aggregate Amt.	6. City/State/Zip:
\$	8. Employer (if applicable, mandatory):
Check box if Electioneering Communication	9. Occupation (if applicable, mandatory):
	10. Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

<sup>\*</sup> 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."