Colorado Secretary of State 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





REPORT OF CONTRIBUTIONS AND EXPENDITURES

ido Constitution and Tital 1, Article 45 of the Colo	(/	
Common Sense For Erie / Christiaan va	n Woudenberg	
As Shown On Registration		
1821 Crestview Lane		
Erie, CO 80516		
Candidate		
KeyBank / 14412 Orchard Pkwy, Westm	inster, CO 80023	
NUMBER		
	*	
s previous report filed on (date)		
	f Zero in Line 5)	
t Contains Electioneering Communication		
Date icable) Space Throug Date of Reporting Period (monetary only) e 11) & Beginning Amount (line 1 + line 2) e 19) orting Period (monetary) (line 3 – line 4)	Totals Detailed Summary Page \$0 \$0 \$0 \$1,098.86 \$-1,098.86	
all impose a penalty of \$50 per day for each [Art. XXVIII Sec. 10(2)(a)]	h day that a report is filed late.	
y either the Registered Agent OR the Candidate): y knowledge or belief all contributions receive the form of membership dues transferred by hristiaan van Woudenberg van Woudenberg	ved during this reporting period,	
	Common Sense For Erie / Christiaan va As Shown On Registration 1821 Crestview Lane Erie, CO 80516 Candidate KeyBank / 14412 Orchard Pkwy, Westm NUMBER Seprevious report filed on (date) on ONLY Intation Reports MUST Have a Monetary Balance of the Contains Electioneering Communication anuary 1, 2018 Throughout Throughout Throughout Throughout Throughout Throughout Through Throughout Th	

DETAILED SUMMARY

Full Name of Committee/Person: Common Sense For Erie / Christiaan van Woudenberg

Current Reporting Period:

January 1, 2018

Through February 28, 2018

Fund	ds on hand at the beginning of reporting period (Monetary Only)	\$0
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "A")	\$0
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$0
8	Loans Received (From Schedule "C")	\$ 2,500
9	Total of Other Receipts (Interest, Dividends, etc.)	\$0
10	Returned Expenditures (from recipient) (From Schedule "D")	\$0
11	Total Monetary Contributions (Total of lines 6 through 10)	\$0
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$0
13	Total Contributions (Line 11 + line 12)	\$ 0
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$ 1,097.87
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 0.99
16	Loan Repayments Made (From Schedule "C")	\$
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ 0
18	Total Coordinated Non-Monetary (in-kind) Expenditures (Candidate/Candidate Committee & Political Parties only)	\$0
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 1,098.86
20	Total Spending (Line 18 + line 19)	\$ 1,098.86

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

1

Full Name of Committee/Person:

Common Sense For Erie / Christiaan van Woudenberg

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

PLEASE PRINT/TYPE			
1. Date Accepted	4. Name (Last, First):		
2. Contribution Amt. \$	5. Address:		
3. Aggregate Amt. *	6. City/State/Zip:		
\$	7. Description:		
Check box if	8. Employer (if applicable, mandatory):		
Electioneering Communication	9. Occupation (if applicable, mandatory):		
1. Date Accepted	4. Name (Last, First):		
2. Contribution Amt.	5. Address:		
\$ 3. Aggregate Amt. *	6. City/State/Zip:		
3. Aggregate Amt. *	7. Description:		
Check box if	8. Employer (if applicable, mandatory):		
Electioneering Communication	9. Occupation (if applicable, mandatory):		
1. Date Accepted	4. Name (Last, First):		
Date Accepted Contribution Amt.	4. Name (Last, First):		
Date Accepted Contribution Amt. \$	·		
Date Accepted Contribution Amt.	5. Address:		
Date Accepted Contribution Amt. \$ Aggregate Amt. *	5. Address: 6. City/State/Zip:		
Date Accepted Contribution Amt. \$ Aggregate Amt. *	5. Address: 6. City/State/Zip: 7. Description:		
Date Accepted Contribution Amt. Aggregate Amt. * Check box if Electioneering	5. Address:		
Date Accepted Contribution Amt. S Aggregate Amt. * Check box if Electioneering Communication Date Accepted	5. Address:		
1. Date Accepted 2. Contribution Amt. \$ 3. Aggregate Amt. * Check box if Electioneering Communication	5. Address:		
1. Date Accepted 2. Contribution Amt. \$ 3. Aggregate Amt. * \$ Check box if Electioneering Communication 1. Date Accepted 2. Contribution Amt. \$ 3. Aggregate 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:		
1. Date Accepted 2. Contribution Amt. \$ 3. Aggregate Amt. * \$ Check box if Electioneering Communication 1. Date Accepted 2. Contribution Amt. \$ 3. Aggregate Amt. * \$	5. Address:		
1. Date Accepted 2. Contribution Amt. \$ 3. Aggregate Amt. * \$ Check box if Electioneering Communication 1. Date Accepted 2. Contribution Amt. \$ 3. Aggregate 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:		

* 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.]

	Comment Control For Fair / Chair II
Full Name of Committ	ee/Person: Common Sense For Erie / Christiaan van Woudenberg
PLEASE PRINT/TYPE	
1. <u>Date Expended</u> 01/27/18	4. Name: Imprint.com
2. Amount	5. Address: 14550 Beechnut St.
\$ 1010.50 3.Recipient is (optional):	6. City/State/Zip: Houston, TX 77083
Committee	7. Purpose of Expenditure: Yard Signs
Non-Committee	Check box if Electioneering Communication
1. <u>Date Expended</u> 01/29/18	4. Name: Staples
2. Amount	5. Address: 14458 Delaware St Ste 600
\$ 27.14 3.Recipient is (optional):	6. City/State/Zip: Westminster, CO 80023
Committee	7. Purpose of Expenditure: Business Cards
Non-Committee	Check box if Electioneering Communication
1. <u>Date Expended</u> 01/29/18	4. Name: Facebook
2. Amount 30.00	5. Address: 1 Hacker Way
\$ 3.Recipient is (optional):	6. City/State/Zip: Menlo Park, CA 94025
Committee	7. Purpose of Expenditure: Advertising
Non-Committee	Check box if Electioneering Communication
1. <u>Date Expended</u> 02/28/18	4. Name: Facebook
2. Amount	5. Address: 1 Hacker Way
\$ 30.23 3.Recipient is (optional):	6. City/State/Zip: Menlo Park, CA 94025
Committee	7. Purpose of Expenditure: Advertising
Non-Committee	Check box if Electioneering Communication
1 Date Expended	4. Name:
2. Amount	5. Address:
\$ 3.Recipient is (optional):	6. City/State/Zip:
Committee	7. Purpose of Expenditure:
Non-Committee	Check box if Electioneering Communication

Schedule C - Loans

Candidate Committees only

Full Name of Committee/Person:

Common Sense For Erie / Christiaan van Woudenberg

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			
	Christiaan		
Address:			
City/State/Zip: Erie, CO 80516			
Original Amount of Loan: \$2,500			0.00%
Loan Amount Received This Reporting Period: \$_	2,500	Total o	of All Loans This Reporting Period: \$\frac{2,500}{(Place on line 8 of Detailed Summary Report)}
Principal Amount Paid This Reporting Period: \$_	0		
Interest Amount Paid This Reporting Period: \$_	0		
Amount Repaid This Reporting Period: \$_ (Amount Repaid is sum of Principal & Interest entered on Detail Sur		Total F (Sun	Repayments Made: \$ n of Schedule C pages, Place on line 16 of Detailed Summary)
Outstanding Balance: \$	2,500		
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
Christiaan van Woudenberg	1821 Crestview Lane, Erie, C) 80516	\$2,500
	·	

Schedule D – Returned Contributions & Expenditures

Full Name of Commit	Full Name of Committee/Person:		
Returned Contributions (Previously reported on Schedule A – Contributions accepted and then returned to donors)			
PLEASE PRINT/TYPE	,		
1. Date Accepted	4. Name (Last, First):		
2. <u>Date Returned</u>	5. Address:		
3. Amount	6. City/State/Zip:		
\$	7. Purpose:		
1. Date Accepted			
	4. Name (Last, First):		
2. <u>Date Returned</u>	5. Address:		
3. Amount	6. City/State/Zip:		
\$	7. Purpose:		
(Previousl	Returned Expenditures y reported on Schedule B – Expenditures returned or refunded to the committee)		
1. <u>Date Expended</u>	4. Name (Last, First):		
2. Date Returned	5. Address:		
3. Amount	6. City/State/Zip:		
\$	7. Comment (Optional):		
1. Date Expended	4. Name (Last, First):		
2. <u>Date Returned</u>	5. Address:		
3. Amount	6. City/State/Zip:		
\$	7. Comment (Optional):		

Statement of Non-Monetary Contributions

[Art. XXVIII, Sec. 2(5)(a)(II)(III) & Sec. 5(3) & 1-45-108(1), C.R.S.]

Common Sense For Erie / Christiaan van Woudenberg **Full Name of Committee/Person:** PLEASE PRINT/TYPE 1. Date Provided 4. Name (Last, First): 5. Address: _____ 2. Fair Market Value 6. City/State/Zip: _____ \$ 7. Description: 3. Aggregate Amt. 8. Employer (if applicable, mandatory): Check box if 9. Occupation (if applicable, mandatory): Electioneering Communication Check box if Coordinated with a Candidate/Candidate Committee or Political Party. * 1. Date Provided 4. Name (Last, First): 5. Address: _____ 2. Fair Market Value 6. City/State/Zip: _____ \$ 7. Description: 3. Aggregate Amt. 8. Employer (if applicable, mandatory): Check box if 9. Occupation (if applicable, mandatory): Electioneering Communication Check box if Coordinated with a Candidate/Candidate Committee or Political Party. * 1. Date Provided 4. Name (Last, First): 5. Address: _____ 2. Fair Market Value

* 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."

7. Description:

3. Aggregate Amt.

Check box if

Electioneering Communication 6. City/State/Zip: _____

8. Employer (if applicable, mandatory):

9. Occupation (if applicable, mandatory):

Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *