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SEP 21 2021

CITY CLERK

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

Full Name of Committee/Person:	<del>Paul E. Bingham</del> Carol Fey for Mayor <small>As Shown On Registration</small>
Address of Committee/Person:	236 W. Delaware Circle
City, State & Zip Code:	Littleton, CO. 80120
Committee Type:	Candidate
Name and Address of Financial Institution:	Bank Of Colorado, 2679 W. Main. Littleton, CO. 80120
Email Address:	PBingham@ecentral.com

**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)	\$1650.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$1650.00
4	Total Monetary Expenditures (line 19)	\$ 2976.00
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 – line 4)	\$ 1326.

**The appropriate officer (city clerk) shall impose a penalty of \$50 per day for each day that a report is filed late. (Littleton Municipal Code 1-7-7)**

**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: Paul E. Bingham

Registered Agent's Signature: *Paul E. Bingham* Date: 09/21/2021

Print Candidate Name: Carol Fey

Candidates Signature: *C Fey* Date: 09/21/2021

**DETAILED SUMMARY**

Full Name of Committee/Person: ~~Paul Bowman~~ Carol Fey for Mayor

Current Reporting Period: 5/21/2021 Through 9/21/2021

<b>Funds on hand at the beginning of reporting period</b> (Monetary Only)		\$
6	<b>Itemized Contributions \$20 or More</b> [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 2976.00
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$ 0
8	<b>Loans Received</b> (Please list on Schedule "C")	\$ 0
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$ 0
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$ 0
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$ 2976.00
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$ 0
13	<b>Total Contributions</b> (Line 11 + line 12)	\$ 2976.00
14	<b>Itemized Expenditures \$20 or More</b> [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 2976.00
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$ 0
16	<b>Loan Repayments Made</b> (Please list on Schedule "C")	\$ 0
17	<b>Returned Contributions (To donor)</b> (Please list on Schedule "D")	\$ 0
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$ 0
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$ 2976.00
20	<b>Total Spending</b> (Line 18 + line 19)	\$ 2976.00

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

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

**Full Name of Committee/Person:** Carol Fey for Mayor

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

**PLEASE PRINT/TYPE**

1. <u>Date Accepted</u> 5/12/2021	4. Name (Last, First): <u>BINGHAM, PAUL</u>
2. <u>Contribution Amt.</u> \$ 500	5. Address: <u>236 W. DELAWARE AVENUE</u>
3. <u>Aggregate Amt. *</u> \$ 500	6. City/State/Zip: <u>LITTLETON, CO, 80120</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u> ): <u>RETIRED</u>

1. <u>Date Accepted</u> 6/27/21	4. Name (Last, First): <u>HOADLEY, BEU</u>
2. <u>Contribution Amt.</u> \$ 200	5. Address: <u>681 NICHOLS DR.</u>
3. <u>Aggregate Amt. *</u> \$ 200	6. City/State/Zip: <u>LITTLETON, CO, 80122</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u> ): <u>RETIRED</u>

1. <u>Date Accepted</u> 8/16/21	4. Name (Last, First): <u>HARRIS, BOB &amp; FLESHER, RAY</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>6281 S. CEDAR ST.</u>
3. <u>Aggregate Amt. *</u> \$ 100	6. City/State/Zip: <u>LITTLETON, CO, 80120</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u> ): <u>RETIRED</u>

1. <u>Date Accepted</u> 8/16/21	4. Name (Last, First): <u>BREDEHAERT</u>
2. <u>Contribution Amt.</u> \$ 300	5. Address: <u>5848 S. LOTHAN ST.</u>
3. <u>Aggregate Amt. *</u> \$ 300	6. City/State/Zip: <u>LITTLETON, CO, 80120</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>SHEPARD OF THE HILLS SCHOOL, RETIRED</u>
	9. Occupation (if applicable, <u>mandatory</u> ): <u>EDUCATOR, RETIRED</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: ~~Pam Buchanan~~ Carol Fey for Mayor

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 8/30/21	4. Name (Last, First): <u>CHRISTIANSON, LYNN E DANA</u>
2. <u>Contribution Amt.</u> \$ 300	5. Address: <u>600 E FREMONT PLACE</u>
3. <u>Aggregate Amt. *</u> \$ 300	6. City/State/Zip: <u>LITTLETON, CO, 80120</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>FEDERAL HUNY DEPT, HAMMELBER</u>
	9. Occupation (if applicable, <u>mandatory</u> ): <u>ENGINEER, HAMMELBER</u>

1. <u>Date Accepted</u> 9/21/21	4. Name (Last, First): <u>FIFE, GREG</u>
2. <u>Contribution Amt.</u> \$	5. Address: <u>8197 S. JERNSHUMA CT</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>LITTLETON, CO, 80122</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>RETIRED</u>
	9. Occupation (if applicable, <u>mandatory</u> ): <u>RETIRED</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: ~~PAUL BINSWANG~~ Carol Fey for Mayor

**PLEASE PRINT/TYPE**

1. <u>Date Expended</u> 5/11/21	4. Name: WESTERN WELCOME WEEK INC
2. <u>Amount</u> \$ 175	5. Address:
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: LITTLETON, CO, 80120
	7. Purpose of Expenditure: PARTICIPATE IN PARADE <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 06/25/21	4. Name: GRANDI
2. <u>Amount</u> \$ 920	5. Address: INTERNET
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip:
	7. Purpose of Expenditure: WEB HOSTING FOR WEB SITE <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 6/27/21	4. Name: PHOTOGRAPHER - EVAN SIMON
2. <u>Amount</u> \$ 300	5. Address: INTERNET
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> 7/15/21	4. Name: CITY OF LITTLETON
2. <u>Amount</u> \$	5. Address: 2255 W. BERRY AVE
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: LITTLETON, CO, 80120
	7. Purpose of Expenditure: CITY MAP W/ PRECINCTS & DIST'S <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 7/21/21	4. Name: USPS
2. <u>Amount</u> \$ 44	5. Address:
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: LITTLETON, CO, 80120
	7. Purpose of Expenditure: POSTAGE FOR CAMPAIGN <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: ~~PAUL BINGHAM~~ Carol Fey for Mayor

**PLEASE PRINT/TYPE**

1. <u>Date Expended</u> 7/28/21	4. Name: <u>LISA MIGRANE</u>
2. <u>Amount</u> \$ 510	5. Address: <u>INTERNET</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>SET-UP WEBSITE &amp; PAPERBACK</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 7/28/21	4. Name: <u>MEGAN ZACHER</u>
2. <u>Amount</u> \$ 363	5. Address: <u>INTERNET</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>FLYER DESIGN</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 9/14/21	4. Name: <u>VISHNU PRINTING LITTLETON</u>
2. <u>Amount</u> \$ 1405.	5. Address: <u>1440 LITTLETON BLVD,</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>LITTLETON, CO, 80120</u>
	7. Purpose of Expenditure: <u>PRINTING</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