

Pitkin County Clerk and Recorder  
 501 E Hyman Ave., STE 101  
 Aspen, Colorado 81611  
 Phone: (970) 429-2732  
 Fax: (970) 445-3007  
 eFile address: elections@pitkincounty.com  
 Website: www.pitkinvotes.com  
 Kelly McNicholas Kury, Election Manager  
 kelly.mcnicholas@pitkincounty.com

# PITKIN COUNTY

space below for office use only

**RECEIVED**  
 APR 08 2019  
 PITKIN COUNTY CLERK

## CLERK AND RECORDER

### REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Candidate:	Clapper 4 Commissioner / Patti Kay - Clapper
Address of Committee/Candidate:	218 Cottonwood Lane
City, State & Zip Code:	Aspen CO 81611
Committee Type:	County candidate committee
Name and Address of Financial Institution	Community Bank of Colorado Bx 20368 Kansas City MO 64196

**Type of Report**

- Regularly Scheduled Filing.
- Amended Filing. This amends previous report filed on (date) 11-30-2018  
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: 12-02-2018 Through 04-08-2019  
 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)	\$ 1877.77
2 Total Monetary Contributions (line 11)	\$ 150.00
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 2027.77
4 Total Monetary Expenditures (line 19)	\$ 407.49
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 1620.28

**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: Patti Kay-Clapper  
 Registered Agent's Signature: Patti Kay-Clapper Date: 04-08-19  
 Print Candidate Name: Patti Kay-Clapper  
 Candidates Signature: Patti Kay-Clapper Date: 04-08-19



DETAILED SUMMARY

Full Name of Committee/Candidate: Clapper 4 Commissioner/Patti Kay-Clapper

Current Reporting Period: 12-02-2018 Through 04-08-2019

	Funds on hand at the beginning of reporting period (Monetary Only)	\$ 1877.77
6	Itemized Contributions of \$20 or More <small>(C.R.S. §1-45-108(1)(a), H.R.C. §6-6-4) (Please list on Schedule "A")</small>	\$ 150.00
7	Total of Non-Itemized Contributions <small>(Individual Contributions of \$19.99 and Less)</small>	\$ 0
8	Loans Received <small>(Please list on Schedule "C")</small>	\$ 0
9	Total of Other Receipts <small>(Interest, Dividends, etc.)</small>	\$ 0
10	Returned Expenditures (from recipient) <small>(Please list on Schedule "D")</small>	\$ 0
11	Total Monetary Contributions <small>(Total of Lines 6 through 10)</small>	\$ 150.00
12	Total Non-Monetary Contributions <small>(From Statement of Non-Monetary Contributions)</small>	\$ 0
13	Total Contributions <small>(Line 11 + line 12)</small>	\$ 150.00
14	Itemized Expenditures \$20 or More <small>(C.R.S. §1-45-108(1)(a), H.R.C. §6-6-4)</small> <small>(Please list on Schedule "B")</small>	\$ 407.49
15	Total of Non-Itemized Expenditures <small>(Expenditures of \$19.99 or Less)</small>	\$ 0
16	Loan Repayments Made <small>(Please list on Schedule "C")</small>	\$ 0
17	Returned Contributions (to donor) <small>(Please list on Schedule "D")</small>	\$ 0
18	Total Expenditure by third party controlled by or coordinated with a candidate, candidate committee or political party. <small>(Statement of Non-Monetary Contribution form)</small>	\$ 0
19	Total Monetary Expenditures <small>(Total of Lines 14 through 17)</small>	407.49
20	Total Spending <small>(Line 18 + line 19)</small>	\$ 407.49



#7  
Amended filing

Schedule A - Itemized Contributions Statement (S20 or more)  
ICRS 51-45-108(1Va); HRC § 6.6.41

Full Name of Committee/Person: Clapper 4 Commissioner / Pat Kay - Clapper

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

PLEASE PRINT/TYPER

1. <u>Date Accepted</u> 02/04/2019	4. Name (Last, First): <u>Kamin Maurice</u>
2. <u>Contribution Amt.</u> \$ 150.00	5. Address: <u>708 W. Commercial St</u>
3. <u>Aggregate Amt. *</u> \$ 150.00	6. City/State/Zip: <u>Victoria, Tx 77901</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, mandatory): <u>retired</u>
	9. Occupation (if applicable, mandatory): _____

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, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

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, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

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, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

\* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following legal authorities: Political Party - Colo. Const. art. XXVIII, Sec. 3(3); Small Donor Committee - Colo. Const. art. XXVIII, Sec. 2(14); Pitkin County Candidate or Candidate Committee - HRC § 6.6.2; Political Committee Supporting or Opposing Pitkin County Candidate(s) - HRC § 6.6.2



(Amended filing) #1

Schedule B - Itemized Expenditures Statement (\$20 or more)  
II-45-108(1)(a), C.R.S.1

Full Name of Committee/Person: Clapper & Commissioner/Patti Kay-Clapper

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>04/01/19</u>	4. Name: <u>Patti Clapper * reimbursement for</u> <u>Thank you dinner 03/24/19</u> <u>Judy Lacy's</u>
2. <u>Amount</u> \$ <u>407.49</u>	5. Address: <u>211 cottonwood Lane</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Aspen CO 81611</u>
	7. Purpose of Expenditure: <u>CLC # "A"</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

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

