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Space Below For Office Use Only

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

Full Name of Committee/Person: Jennifer ^(Gen) MASON for Vail town Council
As Shown On Registration

Address of Committee/Person: 2602 Cortina Lane

City, State & Zip Code: VAIL, CO 81657

Committee Type: Candidate Committee

Name and Address of Financial Institution: 1st Bank of Vail, 17 VAIL Road, VAIL

SOS ID NUMBER (state and county committees):

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)	\$ <u>0</u>
2	Total Monetary Contributions (line 11)	\$ <u>1880</u>
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ <u>1880</u>
4	Total Monetary Expenditures (line 19)	\$ <u>941.10</u>
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ <u>938.90</u>

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.
[Art. XXVIII Sec. 10(2)(a)]

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: Jennifer Mason

Registered Agent's Signature: Jennifer Mason Date: 10/30/2015

Print Candidate Name: Jennifer Mason

Candidates Signature: Jennifer Mason Date: 10/30/2015

DETAILED SUMMARY

Full Name of Committee/Person: Jen Mason for town Council

Current Reporting Period: Oct 9 Through Oct 25

	Funds 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)] (Please list on Schedule "A")	\$	1880
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	0
8	Loans Received (Please list on Schedule "C")	\$	0
9	Total of Other Receipts (Interest, Dividends, etc.)	\$	0
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$	0
11	Total Monetary Contributions (Total of lines 6 through 10)	\$	1880
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	
13	Total Contributions (Line 11 + line 12)	\$	
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	1441.10
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	0
16	Loan Repayments Made (Please list on Schedule "C")	\$	0
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$	0
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$	
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$	1441.10
20	Total Spending (Line 18 + line 19)	\$	1441.10

Schedule A Instructions

NOTE: In addition to the reporting requirements of 1-45-108, C.R.S., please note provisions for specific Committee type, as follows:

Candidate, Issue, Political Party and Political Committee (PC)

- Required to disclose occupation **and** employer for all \$100 or more contributions made by natural persons. (Art. XXVIII, Sec. 7)

Small Donor Committee

- Accepts contributions of no more than \$50 per year, FROM NATURAL PERSONS ONLY. [Art. XXVIII, Sec. 2(14)(a)]

Electioneering Communications Reporting

- Reporting required by persons spending \$1,000 or more on Electioneering Communications,
- Required to disclose occupation **and** employer for all \$250 or more contributions made by natural persons. (Art. XXVIII, Sec. 6)
- Corporate and Labor Organization funding are prohibited. (Art. XXVIII, Sec. 6)

Contribution Limits – State Candidates

(Art. XXVIII, Sec. 3)

Candidates:

- **\$525** ♦ Primary, **\$525** ♦ General if nominated to general election ballot – Gov*, Gov/Lt. Gov**, Secretary of State, Attorney General and State Treasurer
- **\$200** Primary, **\$200** General if nominated to general election ballot – State Senate, State House of Representative, State Board of Education, CU Regent, and District Attorney.

Note: Candidates may receive the primary and general election contributions at one time, the contributor must note that the contribution is for both the primary and general election contribution. Candidates must note both contributions on their report. It is preferred that each contribution be given separately; one check written for the primary and one check written for the general, and so noted by the contributor on the check and by the recipient on the report.

Political Committees (State, County, District & Local):

- **\$525** ♦ per House of Representatives Election Cycle

Political Party (From any person other than Small Donor):

- **\$ 3,175** ♦ per year no more than **\$2,650** ♦ to state party.

Political Party (From Small Donor):

- **\$15,900** ♦ per year no more than **\$13,250** ♦ to state party.

Prohibitions on next page. Please refer to Article XXVIII, Section 3 of the Colorado Constitution for complete contribution limits and prohibited contributions.

* Primary Election

** General Election

♦ Contribution Limits reflect adjustments made by CPF Rule 12 pursuant to Article XXVIII, Sec. 3(13) of the Colorado Constitution.

PROHIBITED CONTRIBUTIONS

[Art. XXVIII, Sec.3 & C.R.S. 1-45-105.5]

- No candidate's candidate committee shall accept contributions from, or make contributions to, another candidate committee.
- No person shall act as a conduit for a contribution to a candidate committee.
- It shall be unlawful for a corporation or labor organization to make contributions to a candidate committee or a political party, and to make expenditures expressly advocating the election or defeat of a candidate; except that a corporation or labor organization may establish a political committee or small donor committee which may accept contributions or dues from employees, officeholders, shareholders, or members.
- No candidate committee, political committee, small donor committee, or political party shall knowingly accept contributions from:
 - Any natural person who is not a citizen of the United States;
 - A foreign government; or
 - any foreign corporation that does not have the authority to transact business in this state pursuant to article 115 of title 7, C.R.S., or any successor section.
- No candidate committee, political committee, small donor committee, issue committee, or political party shall accept a contribution, or make an expenditure, in currency or coin exceeding one hundred dollars.
- No person shall make a contribution to a candidate committee, issue committee, political committee, small donor committee, or political party with the expectation that some or all of the amounts of such contribution will be reimbursed by another person. No person shall be reimbursed for a contribution made to any candidate committee, issue committee, political committee, small donor committee, or political party, nor shall any person make such reimbursement except as provided in subsection (8) of this section. [Art. XXVIII, Sec. 3(8)]
- Contributions from professional and volunteer lobbyists to any member of or candidate for the general assembly, or the governor or candidate for governor are prohibited during regular legislative session.
- Political Committees may contribute to a legislator during session, unless the political committee employs, retains, engages, or uses, with or without compensation, a professional or volunteer lobbyist.



Schedule A – Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Jen MASON for town Council

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

PLEASE PRINT/TYPE

1. Date Accepted <u>October 12</u>	4. Name (Last, First): <u>MASON, Jennifer</u>
2. Contribution Amt. \$ <u>200</u>	5. Address: <u>2602 Cortina lane</u>
3. Aggregate Amt. * \$ <u>200</u>	6. City/State/Zip: <u>VAIL, CO 81657</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check Campaign contributions</u>
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): <u>N/A</u>

1. Date Accepted <u>Oct. 12</u>	4. Name (Last, First): <u>Brassel, Martha</u>
2. Contribution Amt. \$ <u>30</u>	5. Address: <u>16 James Creek</u>
3. Aggregate Amt. * \$ <u>230</u>	6. City/State/Zip: <u>Edwards, CO 81632</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign contributions</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>Oct 13</u>	4. Name (Last, First): <u>Jensen, Bill & Cheryl</u>
2. Contribution Amt. \$ <u>500</u>	5. Address: <u>1718 Buffer Creek</u>
3. Aggregate Amt. * \$ <u>730</u>	6. City/State/Zip: <u>VAIL, CO 81657</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign contributions</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>Oct 20</u>	4. Name (Last, First): <u>FRAMPTON, HARRY & SUSAN</u>
2. Contribution Amt. \$ <u>500</u>	5. Address: <u>14 Beaver Dam Road</u>
3. Aggregate Amt. * \$ <u>1230</u>	6. City/State/Zip: <u>VAIL, CO 81657</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign contributions</u>
	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 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).

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A

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

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

Full Name of Committee/Person: Jen MASON for VAIL town Council

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/20</u>	4. Name (Last, First): <u>Patrick Zimmerman</u>
2. Contribution Amt. \$ <u>300</u>	5. Address: <u>2683 Cortina lane</u>
3. Aggregate Amt. * \$ <u>1530</u>	6. City/State/Zip: <u>Vail, CO 81657</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign contributions</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/22</u>	4. Name (Last, First): <u>Kelton, Elaine</u>
2. Contribution Amt. \$ <u>200</u>	5. Address: <u>1034 Homestake Cir</u>
3. Aggregate Amt. * \$ <u>1730</u>	6. City/State/Zip: <u>VAIL, CO 81657</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign contributions</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/20 10/23</u>	4. Name (Last, First): <u>Gleason, Colin</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>P.O. Box 326</u>
3. Aggregate Amt. * \$ <u>1830</u>	6. City/State/Zip: <u>Eagle, CO 81631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign contributions</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/23</u>	4. Name (Last, First): <u>Proper, Paulina ? SCOTT</u>
2. Contribution Amt. \$ <u>25</u>	5. Address: <u>P.O. Box 4138</u>
3. Aggregate Amt. * \$ <u>1855</u>	6. City/State/Zip: <u>Eagle, CO 81631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign contributions</u>
	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 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).

B

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

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

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/23	4. Name (Last, First): <u>GARY, LAUREN</u>
2. <u>Contribution Amt.</u> \$ <u>25</u>	5. Address: <u>4511 Meadow DR. # 701,</u>
3. <u>Aggregate Amt. *</u> \$ <u>1880</u>	6. City/State/Zip: <u>VAIL, CO 81657</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Campaign Contributions</u>
	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>): _____

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: -Jen MASON for Vail town Council

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>10/15</u>	4. Name: <u>Rocky Mtn. Repro graphics</u>
2. <u>Amount</u> \$ <u>764.03</u>	5. Address: <u>P.O. Box 1586</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Eagle, CO 81631</u>
	7. Purpose of Expenditure: <u>Signs & stickers</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/15</u>	4. Name: <u>Eagle County Clerk</u>
2. <u>Amount</u> \$ <u>62.16</u>	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Eagle, CO 81631</u>
	7. Purpose of Expenditure: <u>voter registration list</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/20</u>	4. Name: <u>1st Bank of Vail</u>
2. <u>Amount</u> \$ <u>34.02</u>	5. Address: <u>17 Vail Road</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>VAILE, CO 81657</u>
	7. Purpose of Expenditure: <u>BANK FEE'S</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/23</u>	4. Name: <u>AMAZON</u>
2. <u>Amount</u> \$ <u>29.91</u>	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>Clear Bags for candy</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/21</u>	4. Name: <u>COSTCO</u>
2. <u>Amount</u> \$ <u>51</u>	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Gypsum, CO</u>
	7. Purpose of Expenditure: <u>Candy to hand out</u>
	<input type="checkbox"/> Check box if Electioneering Communication

Schedule C - Loans

Full Name of Committee/Person: _____

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)

Total Repayments Made: \$ _____
 (Sum of Schedule C pages, Place on line 16 of
 Detailed Summary)

Outstanding Balance: \$ _____

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

(16)

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: _____

Returned Contributions

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Purpose: _____

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Purpose: _____

Returned Expenditures

(Previously reported on Schedule B – Expenditures returned or refunded to the committee)

PLEASE PRINT/TYPE

1. <u>Date Expended</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Comment (Optional): _____

1. <u>Date Expended</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	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.]

Full Name of Committee/Person: _____

PLEASE PRINT/TYPE

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</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>): _____
10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *	

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</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>): _____
10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *	

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</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>): _____
10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *	

* 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."

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