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RECEIVED
 OCT 16 2023
 BY: CHF

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

Full Name of Committee/Person:	<u>Common Sense For Westminster</u> <small>As Shown On Registration</small>
Address of Committee/Person:	<u>13818 Osage Ct.</u>
City, State & Zip Code:	<u>Westminster CO 80023</u>
Committee Type:	<u>Issue Committee</u>
Name and Address of Financial Institution	<u>First Bank. P.O. Box 150097 Lakewood CO 80215</u>

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: Aug 16, 2023 Date **Through** Oct 15, 2023 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>15237.50</u>
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ <u>15237.50</u>
4	Total Monetary Expenditures (line 19)	\$ <u>13520.30</u>
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ <u>1717.20</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: Sandra S. Pospisil
 Registered Agent's Signature: [Signature] Date: 10/16/23
 Print Candidate Name: _____
 Candidates Signature: _____ Date: _____

DETAILED SUMMARY

Full Name of Committee/Person: Common Sense For Westminster / Sandra S. Pospisil

Current Reporting Period: Aug. 16, 2023

Through

	Funds on hand at the beginning of reporting period (Monetary Only)	\$
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 15,237.50
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ N/A
8	Loans Received (Please list on Schedule "C")	\$ N/A
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ N/A
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ N/A
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 15,237.50
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ N/A
13	Total Contributions (Line 11 + line 12)	\$ 15,237.50
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 12,435.80
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 84.50
16	Loan Repayments Made (Please list on Schedule "C")	\$ N/A
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ N/A
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ N/A
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 13,520.30
20	Total Spending (Line 18 + line 19)	\$ 13,520.30

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>	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>): _____

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>): _____

See Attached

* 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).

Deposits:

DATE	NAME	ADDRESS	EMPLOYER	POSITION	CONTRIBUTION
8/16/2023	Sandra Pospisil	13818 Osage Ct Westminster CO 80023	Retired		\$500.00
8/16/2023	Scott Shilling	11656 Decatur Westminster CO 80234	Workweb.IO	CEO	\$500.00
8/16/2023	Kristine Ireland	13816 Lexington Pl Westminster CO 80023	self employed	Piano Teacher	\$500.00
8/16/2023	Bruce Baker	14761 Kalamath Ct Westminster CO 80023	Retired		\$500.00
8/16/2023	Mike Obermeyer	876 Lexington Ave Westminster CO 80023	Retired		\$200.00
8/23/2023	Bruce Baker	14761 Kalamath Ct Westminster CO 80023	Retired		\$900.00
8/24/2023	Bruce Baker	14761 Kalamath Ct Westminster CO 80023	Retired		\$20.00
8/24/2023	David Dubberly	9598 Lowell Blvd Westminster CO 80031	Retired		\$157.50
8/23/2023	Gene Bade	1295 W 104th Dr Westminster CO 80023	Retired		\$300.00
8/15/2023	Kathleen Dodardo	9914 Wolff St Westminster CO 80031	Regis University	Professor	\$50.00
8/27/2023	Darren Doyle	1456 Lexington Ave Westminster CO 80023	Self Employed	IT	\$100.00
8/25/2023	Bruce Baker	14761 Kalamath Ct Westminster CO 80023	Retired		\$900.00
8/15/2023	Sharon Harrison	904 W 104th Dr Westminster CO 80023	Micro Precision Calibration	Account Mngr	\$150.00
8/31/2023	Bruce Baker	14761 Kalamath Ct Westminster CO 80023	Retired		\$900.00
8/31/2023	William Sparks	7396 Canosa Ct Westminster CO 80030	Retired		\$300.00
9/1/2023	Nancy Buehmann	14757 Osage Ct Westminster CO 80023	Oracle Corp	Software Eng	\$50.00
9/1/2023	Rob Strain	3860 W 105th Dr Westminster CO 80031	Retired		\$600.00
9/7/2023	Bruce Baker	14761 Kalamath Ct Westminster CO 80023	Retired		\$900.00
9/12/2023	Bruce Baker	14761 Kalamath Ct Westminster CO 80023	Retired		\$900.00
9/12/2023	Kristine Franklin	11637 Shoshone Way Denver CO 80234	Self Employed		\$100.00
9/14/2023	Bruce Baker	14761 Kalamath Ct Westminster CO 80023	Retired		\$900.00
9/16/2023	Mary Yonts	4970 W 107th Loop Westminster CO80031	Retired		\$500.00
9/18/2023	Bruce Baker	14761 Kalamath Ct Westminster CO 80023	Retired		\$900.00
9/19/2023	Scott Mueller	7360 Dale Ct Westminster CO 80030	Retired		\$110.00
9/21/2023	Bruce Baker	14761 Kalamath Ct Westminster CO 80023	Retired		\$900.00
9/21/2023	Bhavin Amin	996 Lexington Ave Westminster CO 80023	Self Employed	Owner	\$300.00
9/22/2023	Bruce Baker	14761 Kalamath Ct Westminster CO 80023	Retired		\$900.00
9/25/2023	Bruce Baker	14761 Kalamath Ct Westminster CO 80023	Retired		\$900.00
9/26/2023	Bruce Baker	14761 Kalamath Ct Westminster CO 80023	Retired		\$900.00
10/2/2023	Jan Mider	10625 NW Routt Way Westminster CO80021	Siemens	Electrical Eng	\$100.00
10/11/2023	Randy Wiley	14762 Kalamath Ct Westminster CO 80023	Retired		\$300.00

\$15,237.50

Schedule B – Itemized Expenditures Statement (\$20 or more)

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

Full Name of Committee/Person: Common Sense for Westminster / Sandra Pospisil

PLEASE PRINT/TYPE

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

SEE ATTACHED

Expenses

DATE	NAME	ADDRESS	PURPOSE	AMOUNT
8/21/2023	Vistago Print LLC	6706 Lohmans Ford Rd, Lago Vista, TX 78645	Banners	\$ 343.23
8/28/2023	Dollar Tree	14458 Delaware St Westminster CO 80023	Balloons	\$ 6.52
8/28/2023	Got Print	7651 N San Ferrando Rd Burbank CA 91505	Banners	\$ 468.70
8/16/2021	VistaPrint	275 Wyman St Waltham MA 02421	Door Hangers	\$ 635.29
8/17/2023	Wix.com LTD	40 Namal TelAviv 6350671	Purchase Domain	\$ 17.35
8/17/2023	Amazon	410 Terry Ave N Seattle WA 98109	Steel Stakes	\$ 125.93
8/23/2023	FedEx Office	1171 W 120th Ave Westminster CO 80234	Map of Westminster	\$ 396.31
9/5/2023	Vista Print	275 Wyman St Waltham MA 02421	Door Hangers	\$ 795.70
9/5/2023	Amazon Mktplace	410 Terry Ave N Seattle WA 98109	Banner Supply	\$ 10.22
9/6/2023	Vista Print	275 Wyman St Waltham MA 02421	Door Hangers	\$ 134.96
10/10/2023	VistaPrint	275 Wyman St Waltham MA 02421	Post Cards	\$ 10,501.59
				\$ 13,435.80

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

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."