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Colorado Secretary of State
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REPORT OF CONTRIBUTIONS AND EXPENDITURES
(I-45-108, C.R.S.)

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER
As Shown On Registration

Address of Committee/Person: 7433 QUEEN CIRCLE

City, State & Zip Code: ARVADA, COLORADO 80005

Committee Type: CITY COUNCIL DIST. 4 CAMPAIGN

Name and Address of Financial Institution: FIRST BANK, 6355 WARD RD ARVADA 80004

SOS ID NUMBER (state and county committees): N/A

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: APRIL 4, 2011 Date Through SEPTEMBER 18, 2011 Date

Declared Total Spending (if applicable) [Art. XXVIII, Sec. 4(1)] \$ 1941.14

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 0
2	Total Monetary Contributions (line 11)	\$ 3027.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 3027.00
4	Total Monetary Expenditures (line 19)	\$ 1941.14
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 1085.86

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: BOB DYER

Registered Agent's Signature: Bob Dyer Date: 9-19-11

Print Candidate Name: BOB DYER

Candidates Signature: Bob Dyer Date: 9-19-11

DETAILED SUMMARY

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER

Current Reporting Period: APRIL 4, 2011 Through SEPTEMBER 18, 2011

	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")	\$	2850.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	27.00
8	Loans Received (Please list on Schedule "C")	\$	150.00
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)	\$	3027.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	0
13	Total Contributions (Line 11 + line 12)	\$	3027.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	641.14
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")	\$	1,300.00
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$	0
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$	1941.14
20	Total Spending (Line 18 + line 19)	\$	1941.14

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

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 04/04/11	4. Name (Last, First): <u>DYER, BOB</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>7433 QUEEN CIRCLE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK - CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>RCDYER WEALTH MGMT</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>FINANCIAL ADVISOR</u>

See Sched C

1. <u>Date Accepted</u> 05/17/11	4. Name (Last, First): <u>COX, DON</u>
2. <u>Contribution Amt.</u> \$ 300.00	5. Address: <u>7662 YULE COURT</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK - CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>RETIRED CITIZEN</u>
	9. Occupation (if applicable, <u>mandatory</u>):

1. <u>Date Accepted</u> 07/20/11	4. Name (Last, First): <u>DYER, BOB</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>7433 QUEEN CIRCLE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK - CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>):

See Sched C

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>WILLIAMS, LWANNE</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>6989 POPPY COURT</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK - CAMPAIGN CONTRIBUTION</u>
	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 A – Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>BARONE, FRANK</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>12946 W 81ST PLACE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK-CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>RETIRED CITIZEN</u>
	9. Occupation (if applicable, <u>mandatory</u>):

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>CAMINS, STEVE</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>8278 UPHAM COURT</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80003</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK-CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>):

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>WILLIAMS, RICHARD (MARC)</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>7910 RALSTON ROAD</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK-CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>HELM, LESS, SMITH + WILLIAMS</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>ATTORNEY</u>

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>TERRANOVA, EDWARD (TED)</u>
2. <u>Contribution Amt.</u> \$	5. Address: <u>5373 PARFET STREET</u>
3. <u>Aggregate Amt. *</u> \$ 500.00	6. City/State/Zip: <u>ARVADA, CO 80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK-CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>AAARIC TOTAL HOME SRCS</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>OWNER</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: COMMITTEE TO RE-ELECT BOB DYER

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>MCGOFF, MARK</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>7855 ALLISON COURT</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK-CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>FELLMAN, KENNETH</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>12659 W 84th DRIVE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK-CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>LITZAN, MICHAEL</u>
2. <u>Contribution Amt.</u> \$ 75.00	5. Address: <u>10716 ZUNI DRIVE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>DENVER, CO 80234</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK-CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>BOETTIGER, JOHN</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>11328 W 70th AVE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK-CAMPAIGN CONTRIBUTION</u>
	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 A – Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>WILSON, SUSAN</u>
2. <u>Contribution Amt.</u> \$ 25.00	5. Address: <u>11480 W 66th PLACE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK - CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>PULLEN, MEGARA</u>
2. <u>Contribution Amt.</u> \$ 25.00	5. Address: <u>7117 DUDLEY DRIVE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK - CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>FISCHER, JOHN</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>8082 IRIS COURT</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK - CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>RETIRED CITIZEN</u>
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 08/01/11	4. Name (Last, First): <u>STIPECH, DORIS</u>
2. <u>Contribution Amt.</u> \$ 25.00	5. Address: <u>8100 RALSTON ROAD</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK - CAMPAIGN CONTRIBUTION</u>
	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 A – Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>STASTNEY, KENT</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>15632 W 79th PLACE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK - CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>FLOOR SAFETY PRODUCTS OF CO.</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>OWNER</u>

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>FRIE, ROBERT</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>7400 WADSWORTH BOULEVARD</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80003</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK - CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>FRIE, ARDNT + DANBORN</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>ATTORNEY</u>

1. <u>Date Accepted</u> 08/09/11	4. Name (Last, First): <u>BRIENZA, DONNA</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>9985 E 104th AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>HENDERSON, CO 80640</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK - CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>RECYCLING CONNECTIONS</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>OWNER</u>

1. <u>Date Accepted</u> 08/09/11	4. Name (Last, First): <u>BRIENZA, JIM</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>155 W 62nd AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>DENVER, CO 80216</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK - CAMPAIGN CONTRIBUTION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>ROCKY MOUNTAIN ROLLOFF</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>OWNER</u>

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

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

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER

PLEASE PRINT/TYPE

1. Date Expended <u>08/25/11</u>	4. Name: <u>KING SOOPERS</u>
2. Amount \$ <u>193.85</u>	5. Address: <u>12350 W 64th AVENUE</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ARVADA, CO 80007</u>
	7. Purpose of Expenditure: <u>FOOD, BEVERAGES FOR KICK OFF</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>04/12/11</u>	4. Name: <u>FIRST BANK</u>
2. Amount \$ <u>13.50</u>	5. Address: <u>PO BOX 150600</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>LAKWOOD, CO 80215</u>
	7. Purpose of Expenditure: <u>CHECKS</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>06/04/11</u>	4. Name: <u>VILLAGE OF FIVE PARKS</u>
2. Amount \$ <u>72.50</u>	5. Address: <u>13810 W 85th DRIVE</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ARVADA, CO 80005</u>
	7. Purpose of Expenditure: ^{ROOM} <u>RENTAL FEE FOR KICK OFF</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>07/20/11</u>	4. Name: <u>VILLAGE OF FIVE PARKS</u>
2. Amount \$ <u>72.50</u>	5. Address: <u>13810 W 85th DRIVE</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ARVADA, CO 80005</u>
	7. Purpose of Expenditure: <u>ROOM RENTAL FEE FOR KICK OFF</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>06/23/11</u>	4. Name: <u>PRO CONNECT PR</u>
2. Amount \$ <u>75.00</u>	5. Address: <u>3552 W 100th PLACE</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>WESTMINSTER, CO 80031</u>
	7. Purpose of Expenditure: <u>PRESS RELEASE</u> <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: COMMITTEE TO RE-ELECT BOB DYER

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>08/30/11</u>	4. Name: <u>COSTCO</u>
2. <u>Amount</u> \$ <u>223.79</u>	5. Address: <u>5185 WADSWORTH BLVD</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ARVADA, CO 80002</u>
	7. Purpose of Expenditure: <u>FOOD, BEVERAGES FOR KICK OFF</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

Schedule C - Loans

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER

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

N/A

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: COMMITTEE TO RE-ELECT BOB DYER

Returned Contributions

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>WILLIAMS, LUANNE</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>6989 POPPY COURT</u>
3. <u>Amount</u> \$ 50.00	6. City/State/Zip: <u>ARVADA, CO 80007</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>BARONE, FRANK</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>12946 W 81ST PLALE</u>
3. <u>Amount</u> \$ 100.00	6. City/State/Zip: <u>ARVADA, CO 80005</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

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): _____

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER

Returned Contributions

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>CAMINS, STEVE</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>8278 UPHAM COURT</u>
3. <u>Amount</u> \$ 50.00	6. City/State/Zip: <u>ARVADA, CO 80003</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>WILLIAMS RICHARD (MARC)</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>7910 RALSTON ROAD</u>
3. <u>Amount</u> \$ 100.00	6. City/State/Zip: <u>ARVADA, CO 80002</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

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): _____

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER

Returned Contributions

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>TERRANOVA, EDWARD (TED)</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>5373 PARFET STREET</u>
3. <u>Amount</u> \$ 500.00	6. City/State/Zip: <u>ARVADA, CO 80002</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>MCGOFF, MARK</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>7855 ALLISON COURT, #</u>
3. <u>Amount</u> \$ 50.00	6. City/State/Zip: <u>ARVADA, CO 80005</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

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): _____

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER

Returned Contributions

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>FELLMAN, KENNETH</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>12659 W 84th DRIVE</u>
3. <u>Amount</u> \$ 50.00	6. City/State/Zip: <u>ARVADA, CO 80005</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>LITZAU, MICHAEL</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>10716 ZUNI DRIVE</u>
3. <u>Amount</u> \$ 75.00	6. City/State/Zip: <u>DENVER, CO 80234</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

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): _____

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER

Returned Contributions

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>BOETTIGER, JOHN</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>11328 W 70th AVENUE</u>
3. <u>Amount</u> \$ 50.00	6. City/State/Zip: <u>ARVADA, CO 80004</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>WILSON, SUSAN</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>11480 W 66th PLACE</u>
3. <u>Amount</u> \$ 25.00	6. City/State/Zip: <u>ARVADA, CO 80004</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

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): _____

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER

Returned Contributions

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>PULLEN, MEGARA</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>7112 DUDLEY DRIVE</u>
3. <u>Amount</u> \$ 25.00	6. City/State/Zip: <u>ARVADA, CO 80004</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>FRIE, ROBERT</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>7400 WADSWORTH BLVD</u>
3. <u>Amount</u> \$ 100.00	6. City/State/Zip: <u>ARVADA, CO 80003</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

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): _____

Schedule C - Loans

Full Name of Committee/Person: COMMITTEE TO RE-ELECT BOB DYER

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): Dyer, Robert

Address: 7433 Queen Cir

City/State/Zip: Arvada, CO 80005

Original Amount of Loan: \$ 150.00 Interest Rate: 0%

Loan Amount Received This Reporting Period: \$ 150.00

Total of All Loans This Reporting Period: \$ 150.00
(Place on line 8 of Detailed Summary Report)

Principal Amount Paid This Reporting Period: \$ 0.00

Interest Amount Paid This Reporting Period: \$ 0.00

Amount Repaid This Reporting Period: \$ 0.00
(Amount Repaid is sum of Principal & Interest entered on Detail Summary)

Total Repayments Made: \$ 0.00
(Sum of Schedule C pages, Place on line 16 of Detailed Summary)

Outstanding Balance: \$ 150.00

TERMS OF LOAN: 4/4/11
Date Loan Received

NA
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: COMMITTEE TO RE-ELECT BOB DYER

Returned Contributions

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 08/04/11	4. Name (Last, First): <u>FISHER, JOHN</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>8082 IRIS COURT</u>
3. <u>Amount</u> \$ <u>100.00</u>	6. City/State/Zip: <u>ARVADA, CO 80005</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

1. <u>Date Accepted</u> 08/01/11	4. Name (Last, First): <u>STIPECH, DORIS</u>
2. <u>Date Returned</u> 09/02/11	5. Address: <u>8100 PALSTON ROAD</u>
3. <u>Amount</u> \$ <u>25.00</u>	6. City/State/Zip: <u>ARVADA, CO 80002</u>
	7. Purpose: <u>UNAPPOSED CANDIDATE</u>

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: COMMITTEE TO RE-ELECT BOB DYER

N/A

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."

Colorado Secretary of State
 Elections Division
 1700 Broadway, Ste. 200
 Denver, CO 80290
 Ph: (303) 894-2200 ext. 6383
 Fax: (303) 869-4861
 Email: cpfhelp@sos.state.co.us
 www.sos.state.co.us

Space Below For Office Use Only



STATEMENT OF PERSONAL EXPENDITURES BY A CANDIDATE

[1-45-108(1) & 1-45-109, C.R.S.]

For use by a candidate who has not received any contributions (does not have a candidate committee), but has made expenditures of personal funds.

Name of Candidate: BOB DYER

Address of Candidate: 7433 QUEEN CIRCLE

City: ARVADA State: COLORADO Zip Code: 80005

Office: CITY COUNCIL District No.: 4 Elec./Yr.: 2011

Reporting Period: Beginning Date 04/04/11 Ending Date 09/15/11

Total amount of Non-Itemized Expenditures (\$19.99 or less): \$ 0

Expenditures exceeding \$19.99 shall be itemized and listed below.

Date Expended	Amount	Name of Recipient		Address
	\$			
City		State	Zip	Comment / Purpose

Date Expended	Amount	Name of Recipient		Address
	\$			
City		State	Zip	Comment / Purpose

Date Expended	Amount	Name of Recipient		Address
	\$			
City		State	Zip	Comment / Purpose

I certify to the best of my knowledge this Statement of Expenditures is true and correct.

Candidate Signature: Bob Dyer Date: 9-19-11