

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: \_\_\_\_\_

Address of Candidate: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Office: \_\_\_\_\_ District No.: \_\_\_\_\_ Elec./Yr.: \_\_\_\_\_

Reporting Period: Beginning Date \_\_\_\_\_ Ending Date \_\_\_\_\_

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

**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: \_\_\_\_\_ Date: \_\_\_\_\_