

REPORT OF CONTRIBUTIONS AND EXPENDITURES

| Full Name of Committee/Perso | n: | Joseph Carlson | | | |
|---|---|---|--------------|--|--|
| | | As Shown on Regis | tration | | |
| Address of Committee/Person | | 2215 Friendship Circle | | | |
| City, State & Zip Code: | | Colorado Springs, CO, 80904 | | | |
| Committee Type: | | | | | |
| Name of Financial Institution: | | Navy Federal Credit Union | | | |
| Address of Financial Institution | | 1139 Space Center Drive | | | |
| City, State & Zip Code of Financial Institution | | Colorado Springs, CO, 80915 | | | |
| | ends previous report filed on (on new information ONLY | 2016 Through | | 01/04/2017 ate | |
| Please complete applicable sche | dules prior to completing | g the information i | n the follo | owing table. | |
| | | | Tota | Is Detailed Summary Page | |
| 1 Funds on Hand at the Beginning of Reporting Period (monetary only) | | | | \$0.00 | |
| 2 Total Monetary Contributions (line 11 of Detailed Summary) | | | | \$500.00 | |
| 3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2) | | | | \$500.00 | |
| 4 Total Spending (line 20 of Detailed Summary) | | | | \$402.00 | |
| 5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4) | | | 4) | \$98.00 | |
| Authorization (Must be completed I hereby certify and declare, under penal- including all schedules, statements, and received during this reporting period inclu organization are from permissible source Print Registered Agent's Name: | attachments, are true and corr uding any contributions receive | my knowledge or beli ect, and that to the be | st of my kno | owledge or belief all contributions s transferred by a membership | |
| Registered Agent's Signature: | (Submitted Electronica | lly) | Date: | 01/14/2017 | |
| Print Candidate Name: | Joseph Carlson | | | | |
| Candidate's Signature: | (Submitted Electronical | ly) | Date: | 01/14/2017 | |

| | | Detailed Summary | | |
|----------------------|--|---|------------|--|
| Full Nam | e of Committee/Perso | : Joseph Carlson | | |
| Current | Reporting Period: | 11/27/2016 Through | 01/04/2017 | |
| Funds o | n hand at the beginning | g of reporting period (Monetary Only) | \$0.00 | |
| 6 | Itemized Mone | tary Contributions \$20 or More | \$500.00 | |
| 7 | Total of Non-Itemi | zed Contributions (\$19.99 or Less) | \$0.00 | |
| | (Number of Co | ntributions of \$19.99 or Less: 0) | | |
| 8 | Loans Received | | \$0.00 | |
| (Please list on Sche | | ease list on Schedule "C") | | |
| 9 To | | al of Other Receipts | \$0.00 | |
| | (1 | nterest, Dividends, etc.) | | |
| 10 | Returned Expenditures (from recipient) | | \$0.00 | |
| | (Ple | ease list on Schedule "D") | | |
| 11 Tota | | Ionetary Contributions | \$500.00 | |
| | (То | al of lines 6 through 10) | | |
| 12 | Total No | n-Monetary Contributions | \$0.00 | |
| | (From Statement of N | on-Monetary Contributions Schedule "A-2") | | |
| 13 | Т | otal Contributions | \$500.00 | |
| | | (Line 11 + Line 12) | | |
| 14 Itemized | | Expenditures \$20 or More | \$402.00 | |
| | (Ple | ease list on Schedule "B") | | |
| 15 Total of | | on-Itemized Expenditures | \$0.00 | |
| | (Expe | enditures of \$19.99 or Less) | | |
| 16 I | | n Repayments Made | \$0.00 | |
| | (Ple | ase List on Schedule "C") | | |
| 17 | Returned | Contributions (To donor) | \$0.00 | |
| | (Please list on Schedule "D") | | | |
| 18 | Clo | seout Distributions | \$0.00 | |
| | (Balance must | be zero. Please attach Schedule E.) | | |
| 19 | (Inte | entionally Left Blank) | | |
| 20 | | Total Spending | \$402.00 | |
| | | (Lines 14 through 17) | | |

| Schedule A -1 - Itemized Contributions Statement (\$20 or More) | | | | | | |
|---|------------------------------------|--|--|--|--|--|
| Full Name of Committee/Person: | Joseph Carlson | | | | | |
| WARNING: Please read the instruction page for Schedule "A" before completing! | | | | | | |
| Please Print/Type | | | | | | |
| 1. Name (Last, First): | Carlson, Joseph | | | | | |
| 2. Address: | 1322 North Academy Blvd Suite 221 | | | | | |
| 3. City/State/Zip: | Colorado Springs, CO, 80909 | | | | | |
| 4. Description: | Cash deposited to campaign account | | | | | |
| 5. Employer (mandatory if employed): | Retired | | | | | |
| 6. Occupation (mandatory if employed): | Disabled Veteran | | | | | |
| 7. Date Accepted: | 06/01/2016 | | | | | |
| 8. Aggregate Amount this Election Cycle | e: \$0.00 | | | | | |
| 9. Contribution Amount this Reporting P | Period: \$500.00 | | | | | |

| Sched | ule B - Itemized Expenditures Statement (\$20 or more) | |
|----------------------------|---|--|
| Full Name of Committee/ | Person: Joseph Carlson | |
| Please Print/Type | | |
| 1. Name (Last, First): | BIDIart Design, | |
| 2. Address: | | |
| 3. City/State/Zip: | Colorado Springs, CO, 80920 | |
| 4. Purpose of Expenditure: | Payment for BIDIart Design; business cards, flyers, and signs. | |
| 5. Date Expended: | 06/01/2016 | |
| 6. Amount: | \$255.00 | |
| 1. Name (Last, First): | Campaign Partner, Inc., | |
| 2. Address: | PO Box 118 | |
| 3. City/State/Zip: | Still River, MA, 01467 | |
| 4. Purpose of Expenditure: | Payment for Campaign Partner Website. \$49/mo. for November, December, January. | |
| 5. Date Expended: | 11/01/2016 | |
| 6. Amount: | \$147.00 | |