RECEIVED ELECTRONICALLY CITY CLERK'S OFFICE 2017 Mar 31 01:33 pm

REPORT OF CONTRIBUTIONS AND EXPENDITURES



| Full Name of Committee/Person: | Committee | 12 E | led Jernesk | Joshi |
|---|-----------------------|-------------|------------------------|-----------|
| Address of Committee/Person: | As Shown On Regis | | | |
| City, State & Zip Code: | | 2608 | | |
| Committee Type: | | | Co 82936 | |
| Name and Address of Financial Institution: | Candia | | ^ | |
| or initialization in the state of the state | Bank of A328, Ed | Ce 109 | trende | |
| Type of Report ☐ Regularly Scheduled Filling. ☐ Amended Filling. This amends previous reposubmit changes or new information ONLY ☐ Final Filling. | 1.50 | | | |
| Reporting Period Covered: | 7 Date | Through | 3 &6 17 Do | ite |
| Funds on Hand at the Beginning of Reportir | | | Totals Detailed S | ummary Pa |
| Total Monetary Contributions (line 11) | ng Period (moneto | ary only) | \$ 3535. | 69 |
| Total of Monetary Contributions & Beginning | | | \$ 1065,0 | 50 |
| Total Spending (line 20) | Amount (line 1 + | line 2) | \$ 4600.6 | 9 |
| Funds on Hand at the End of Reporting Period | | | \$ 784.8 | 1 |
| End of Reporting Pend | DG (monetary) (line 3 | 3 - line 4) | 3815,80 | 8 |
| Authorization (Must be completed by either the Redeclare, under penalty of perjury, that to the best of this form, including all schedules, statements, and attacknowledge or belief all contributions received during the form of membership dues transferred by a member | chments, are true | and correc | t and that to the hear | |
| Print Registered Agent's Name: | JAK J | 03 H1 | | |
| Registered Agent's Signature: | 6500 | hi Do | te: 3 31 1 | 7 |
| Print Candidate Name: | JOSHY |) | | |
| Candidates Signature: | 1000 | n Date | e: 3 31 1 | 7 |
| | | | | |
| | | | | |

DETAILED SUMMARY

Full Name of Committee/Person: Committee to Elect Janak Joshu Current Reporting Period: 3 11 17 Through: 3 26 17

| Funds | on hand at the beginning of reporting period (Monetary Only) | \$ 3535,69 |
|-------|---|---------------|
| 6 | Itemized Contributions \$20 or More (Please list on Schedule "A") | \$ 3535,69 |
| 7 | Total of Non-Itemized Contributions (\$19.99 or Less) (Number of Contributions of \$19.99 or 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) | \$ 1065.00 |
| 12 | Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions) | \$ -0- |
| 13 | Total Contributions (Line 11 + line 12) | \$ 1065,00 |
| 14 | Itemized Expenditures \$20 or More (Please list on Schedule "B") | \$ 784.81 |
| 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 | Closeout Distributions (Balance must be zero. Please attach Schedule E.) | \$ 0 |
| 19 | (Intentionally left Blank) | \$ |
| 20 | Total Spending (Lines 14 through 17) | \$ 784.81 |

Schedule A-1 - Itemized Contributions Statement (\$20 or More)

| PLEASE PRINT/TYPE |
|---|
| 7,777 to |
| 1. Name (Last, First): Kohlwaies Ken |
| 2. Address: 3622 E. La Salle St |
| 3. City/State/Zip: C-S. CO 80909 |
| 4. Description (cash/check/credit card/etc.): Chedc. |
| 5. Employer (mandatory if employed): Johnson & Johnson |
| 6. Occupation (mandatory if employed): Charmer Sorvice Rep. |
| 7. Date Accepted: 31117 |
| 8. Aggregate Amount This Election Cycle: |
| 9. Contribution Amount This Reporting Portage |
| \$ 25 |
| 1. Name (Last, First): Shah Dwgesh |
| 2. Address: 7 No 1th Richmond Ct. |
| 3. City/State/Zip: Lake Zwhich, IL 60047 |
| 4. Description (cash/check/credit card/etc.): Pay Pal |
| 5. Employer (mandatory if employed): Retized |
| 6. Occupation (mandatory if employed): Retides |
| 7. Date Accepted: 3 11 17 |
| 8. Aggregate Amount This Election Cycle: |
| 9. Contribution Amount This Reporting Period: |

Schedule A-1 Itemized Contributions Statement (\$20 or more)
Page _____ of _____ Use additional pages as necessary

100

| 4. Description (cash/check/credit card/etc.): Check | |
|---|--------|
| 5. Employer (mandatory if employed): Whight Eye Co | mol |
| 6. Occupation (mandatory if employed): The ciam | 0000 |
| 7. Date Accepted: 3 1317 | |
| 8. Aggregate Amount This Election Cycle: 50 | |
| 9. Contribution Amount This Reporting Period: | \$ 50 |
| 1. Name (Last, First): Qreen wood Richard | |
| 2. Address: 3 Menesly Way | |
| 3. City/State/Zip: <u>C-5</u> . Co 80906 | |
| 4. Description (cash/check/credit card/etc.): Check | |
| 5. Employer (mandatory if employed): Retified | |
| 6. Occupation (mandatory if employed): Retific | |
| 7. Date Accepted: 3 13/17 | |
| 8. Aggregate Amount This Election Cycle: \ 5 0 | |
| 9. Contribution Amount This Reporting Period: | \$ 150 |
| 1. Name (Last, First): Kanyi hher Has much | |
| 2. Address: 3402 Sintan Road | |
| 3. City/State/Zip: C-S Co 60907 | |
| 4. Description (cash/check/credit card/etc.): C h e o c | |
| 5. Employer (mandatory if employed): Charmed Enterp | Prize |
| 6. Occupation (mandatory if employed): Owner / Munea | er |
| 7. Date Accepted: 3 115 17 | |
| 8. Aggregate Amount This Election Cycle: | |
| | • (0) |

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Rev. 12/29/2016

Schedule A-1 - Itemized Contributions Statement (\$20 or More) Full Name of Committee/Person: ommi Hee to Elect ternak (PLEASE PRINT/TYPE deingers warry 1. Name (Last, First): 2. Address: 1110 City/State/Zip: _ 4. Description (cash/check/credit card/etc.): ___ Employer (mandatory if employed): 6. Occupation (mandatory if employed): 12 etines 7. Date Accepted: 8. Aggregate Amount This Election Cycle: _____ 9. Contribution Amount This Reporting Period: \$ 300 1. Name (Last, First): Omstead 16015 2. Address: HO City/State/Zip:___ 4. Description (cash/check/credit card/etc.): 5. Employer (mandatory if employed): 6. Occupation (mandatory if employed): 7. Date Accepted:_ Aggregate Amount This Election Cycle: _____ 50

Schedule A-1 Itemized Contributions Statement (\$20 or more)
Page _____ of ______
Use additional pages as necessary

9. Contribution Amount This Reporting Period:

| 1. Name (Last, First): Joshi B. G. | |
|--|---------------------------------------|
| 2. Address: 12 Forest Drive | |
| 3. City/State/Zip: Mo Louis Plains N.J. 070 | 7.50 |
| 4. Description (cash/check/credit card/etc.): C N eak | 1 |
| 5. Employer (mandatory if employed): Retified | <u> </u> |
| 6. Occupation (mandatory if employed): Retited | |
| 7. Date Accepted: 3 11817 | |
| 8. Aggregate Amount This Election Cycle:65 | |
| 9. Contribution Amount This Reporting Period: | \$ 65 |
| 1. Name (Last, First): 5 + Jews Steven | · · · · · · · · · · · · · · · · · · · |
| 2. Address: 6150, Lehman Daire. | |
| 3. City/State/Zip: <u>C.S.</u> CO 80918 | |
| 4. Description (cash/check/credit card/etc.): Pay 12 | |
| 5. Employer (mandatory if employed): 13/11/1 can Education | by Ext. WOR |
| 6. Occupation (mandatory if employed): I. T. worker | |
| 7. Date Accepted: 3 00 17 | |
| 8. Aggregate Amount This Election Cycle: | |
| 9. Contribution Amount This Reporting Period: | \$ 25 |
| 1. Name (Last, First): Shesh Ashok | |
| 2. Address: Q Ruful St. | |
| 3. City/State/Zip: Ansonia CT 06401 | |
| 4. Description (cash/check/credit card/etc.): Check | |
| 5. Employer (mandatory if employed): Child & Alolescent C | linic Asso. |
| 6. Occupation (mandatory if employed): Physiciam | |
| 7. Date Accepted: 3 192017 | |
| 8. Aggregate Amount This Election Cycle: | |
| | |

Rev. 12/29/2016

Office of the City Clerk – City of Colorado Springs

Schedule A-1 - Itemized Contributions Statement (\$20 or More) Full Name of Committee/Person: E lect Janok Justi PLEASE PRINT/TYPE 1. Name (Last, First): __ City/State/Zip: _ 4. Description (cash/check/credit card/etc.): ____ 5. Employer (mandatory if employed): We have been 6. Occupation (mandatory if employed): this into 7. Date Accepted: _____3 MM 8. Aggregate Amount This Election Cycle: ______ 9. Contribution Amount This Reporting Period: 100 1. Name (Last, First): _____ 2. Address: ___ 3. City/State/Zip:____ 4. Description (cash/check/credit card/etc.): 5. Employer (mandatory if employed): 6. Occupation (mandatory if employed): 7. Date Accepted: ____ 8. Aggregate Amount This Election Cycle: ___ 9. Contribution Amount This Reporting Period:

Schedule A-1 Itemized Contributions Statement (\$20 or more)
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Use additional pages as necessary

Schedule B – Itemized Expenditures Statement (\$20 or more) Full Name of Committee/Person: Committee to Elect Farnale Joshi PLEASE PRINT/TYPE 1. Name: Face book 2. Address: 1 However Way 3. City/State/Zip: Memo Pante, CA 94025 4. Purpose of Expenditure: A & ventionment 5. Date Expended: 9 11 17 6. Amount: \$25,23 1. Name: Face book 2. Address: | Hader Waly 3. City/state/Zip: Mendo Park CA 94025 4. Purpose of Expenditure: Alvertisement 5. Date Expended: 3 11 17 6. Amount: \$50.32 1. Name: Porfuic McQuine 2. Address: 6040 Wheatquass Drive 3. City/State/Zip: __ C.S. Co 4. Purpose of Expenditure: 5. Date Expended: 3 113/17 6. Amount: \$ 250

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

Use additional pages as necessary

| 1. Name: Pay Pal | |
|--|-------------|
| 2. Address: Nowth Final St. | 1 |
| 3. City/State/Zip: Samy Jose CA. | L |
| 4. Purpose of Expenditure: Fee | |
| 5. Date Expended: 3/24/17 | |
| 6. Amount: | \$ 9.18 |
| 1. Name: Portaic Mc Guire | |
| 2. Address: 6040 Wheat-gross Drive | |
| 3. City/State/Zip: | |
| 4. Purpose of Expenditure: Video Service | |
| 5. Date Expended: 3 2 3 17 | |
| 6. Amount: | \$ 200 |
| 1. Name: Folebook | |
| 2. Address: 1 Hadres Way | Lwres + |
| 3. City/State/Zip: Memo Paula CA 94025 | |
| 4. Purpose of Expenditure: All years ement | etal-core i |
| 5. Date Expended: 3 024 17 | |
| 6. Amount: | \$250.08 |

Schedule B Itemized Expenditures Statement (\$20 or more)
Page _____ of ____
Use additional pages as necessary