

Town of Timnath  
4750 Signal Tree Drive  
Timnath, CO 80547  
Ph: (970) 224-3211  
Fax: (970) 224-3218  
mpeters@timnathgov.com



## REPORT OF CONTRIBUTIONS AND EXPENDITURES

<b>Full Name of Committee/Person:</b>	Lisa Laake - Laake for Timnath Council
As Shown On Registration	
<b>Address of Committee/Person:</b>	5751 Red Bridge Dr.
<b>City, State &amp; Zip Code:</b>	Timnath, CO 80547
<b>Committee Type:</b>	Candidate Committee
<b>Name and Address of Financial Institution</b>	Wells Fargo - 2827 E. Harmony Rd., Fort Collins, CO 80528

### Type of Report

- Regularly Scheduled Filing.  60 days before election  15 days before election  
 30 days before election  30 days after Election

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:  Through   
Date Date

Declared Total Spending (if applicable) \$

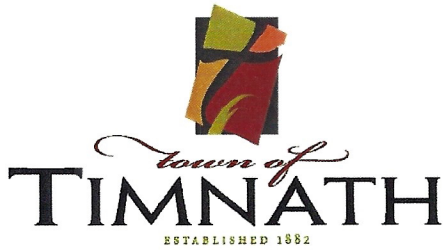
		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 0.00
2	Total Monetary Contributions (line 11)	\$ 25.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 25.00
4	Total Monetary Expenditures (line 19)	\$ 0.00
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 25.00

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.

**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: Lisa Laake

Registered Agent's Signature: Lisa Laake Date: 02/02/24



4750 Signal Tree Drive  
Timnath, CO 80547

Ph: 970.224.3211  
Fax: 970.224.3218  
mpeters@timnathgov.com

**STATEMENT OF PERSONAL EXPENDITURES BY A CANDIDATE**

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

Candidate's Name: Lisa Laake

Candidate's Address: 5751 Red Bridge Dr.

City, State, and Zip Code: Timnath, CO 80547

Office: Council member Phone No.: 970-214-0753 Elec./Yr.: 2024

Reporting Period: Beginning Date 01/19/24 Ending Date 02/01/24

1. <u>Date Expended</u> <u>01/19/24</u>	3. Name: <u>Laake for Timnath Council</u>
2. <u>Amount</u> <u>\$25.00</u>	4. Address: _____
	5. City, State, Zip: _____
	6. Purpose of Expense: <u>To open bank account for committee</u>

1. <u>Date Expended</u>	3. Name: _____
2. <u>Amount</u> <u>\$</u>	4. Address: _____
	5. City, State, Zip: _____
	6. Purpose of Expense: _____

1. <u>Date Expended</u>	3. Name: _____
2. <u>Amount</u> <u>\$</u>	4. Address: _____
	5. City, State, Zip: _____
	6. Purpose of Expense: _____

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

Candidate Signature: Lisa Laake Date: 02/02/24

**DETAILED SUMMARY**Full Name of Committee/Person: Lisa Laake - Laake for Timnath CouncilCurrent Reporting Period: 01/19/24Through 02/02/24

	<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>	\$ 0.00
6	<b>Itemized Contributions \$20 or More</b>	\$ 25.00
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$ 0.00
8	<b>Loans Received</b>	\$ 0.00
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$ 0.00
10	<b>Returned Expenditures (from recipient)</b>	\$ 0.00
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$ 25.00
12	<b>Total Non-Monetary Contributions</b>	\$ 0.00
13	<b>Total Contributions</b> (Line 11 + line 12)	\$ 25.00
14	<b>Itemized Expenditures \$20 or More</b>	\$ 0.00
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$ 0.00
16	<b>Loan Repayments Made</b>	\$ 0.00
17	<b>Returned Contributions (To donor)</b>	\$ 0.00
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$ 0.00
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$ 0.00
20	<b>Total Spending</b> (Line 18 + line 19)	\$ 0.00

**Itemized Contributions Statement (\$20 or more)**

**Full Name of Committee/Person:** Lisa Laake - Laake for Timnath Council

**PLEASE PRINT/TYPE**

1. <u>Date Accepted</u> 01/19/24	4. Name (Last, First): <u>Laake, Lisa</u>
2. <u>Contribution Amt.</u> \$ <u>25.00</u>	5. Address: <u>5751 Red Bridge Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Timnath, CO 80547</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>To open account for committee</u>
	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> ): _____