

City of Centennial
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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

***Detailed spreadsheet may be attached if needing more space to list expenditures.*

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

Candidate Signature: _____ Date: _____