



Alexander Hornaday <ahornaday@hornadaylaw.com> on 10/15/2014 12:26:26 PM

To: 2022190174@fec.gov,
cc:

Subject: Quarterly Report for Women Supporting Cory Gardner

Sent both by facsimile and email.



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Alexander Hornaday

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STATEMENT REQUIRED BY THE U.S. TREASURY DEPARTMENT: The U.S. Treasury Department requires us to advise you that this written advice (including any attachments) is not intended or written to be used, and may not be used by any taxpayer, for the purpose of avoiding any penalties that may be imposed under the Internal Revenue Code. Written advice from our firm relating to Federal tax matters may not, without our express written consent, be used in promoting, marketing or recommending any entity, investment plan or arrangement to any taxpayer, other than the original intended recipient(s) of the written advice.

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <i>Women Supporting Cory Gardner</i>	
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported <i>1624 Market Street, Suite 202</i>	
(c) City, State and ZIP Code <i>Denver, CO 80202</i>	9. FEC Identification Number <i>C 00568030</i>
2. Occupation and Name of Employer (for Individual Filers Only)	

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year-End Report
- 24-Hour Report
- 48-Hour Report

b) Is this Report an amendment? No Yes, it amends the report filed on M M / O O / Y Y - Y Y

5. COVERING PERIOD:

FROM: *07 01 2014*
THROUGH: *09 30 2014*

6. TOTAL CONTRIBUTIONS.....	<i>8050000</i>
7. TOTAL INDEPENDENT EXPENDITURES	<i>8050000</i>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Alexander Hornaday

[Signature]

10/15/14

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20469 Toll Free 800-424-9530, Local 202-694-1100

FEC Schedule 5 (REV. 09/2013)

SCHEDULE 5-A
ITEMIZED RECEIPTS

PAGE 2 OF 3

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)
Women Supporting Cory Gardner

A. Full Name (Last, First, Middle Initial)
Colorado Women's Alliance

Mailing Address
8547 E. Arapahoe Rd. Ste J #185

City State Zip Code
Greenwood Village CO 80112

Date of Receipt
09 / 29 / 2014

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period
80500.00

Name of Employer Occupation

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Date of Receipt

FEC ID number of contributing federal political committee.

Amount of Each Receipt this Period

Name of Employer Occupation

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Date of Receipt

FEC ID number of contributing federal political committee.

Amount of Each Receipt this Period

Name of Employer Occupation

D. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Date of Receipt

FEC ID number of contributing federal political committee.

Amount of Each Receipt this Period

Name of Employer Occupation

SUBTOTAL of Receipts This Page (optional) **80500.00**

TOTAL This Period (last page carry total to Line 6) **80500.00**

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
Women Supporting Cory Gardner

Full Name (Last, First, Middle Initial) of Payee iHeart Media Inc		Date of Public Distribution/Dissemination 09 29 2014
Mailing Address 200 E Bassie Rd		Amount 80,000.00
City San Antonio	State TX	
Zip Code 78209		
Purpose of Expenditure Radio Ad Buy	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Udall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 80500.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee KLZ Radio (Crawford Broadcasting)		Date of Public Distribution/Dissemination 09 29 2014
Mailing Address 2821 S. Parker Rd, Ste 1205		Amount 500.00
City Denver	State CO	
Zip Code 80014		
Purpose of Expenditure Radio Ad Buy	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Mark Udall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 80500.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	80500.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	0.00
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	80500.00

2014-10-15 10:09 AM

