

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Friends of Jared Polis Committee

ADDRESS (number and street) 1904 Pearl St  
 Check if different than previously reported. (ACC)  
Boulder CO 80302

2. **FEC IDENTIFICATION NUMBER** C00435370  
**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)  
CO 02

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on 11 04 2008 in the State of CO  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on in the State of

5. Covering Period 10 01 2008 through 10 15 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Debbie Marquez

Signature of Treasurer Electronically Filed by Debbie Marquez Date 10 23 2008

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Friends of Jared Polis Committee

Report Covering the Period:

From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	127366.65	7058795.37
(b) Total Contribution Refunds (from Line 20(d)).....	2300.00	10203.33
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	125066.65	7048592.04
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	158909.84	6764770.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	5893.01	16778.73
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	153016.83	6747991.65
8. Cash on Hand at Close of Reporting Period (from Line 27).....	123754.49	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Friends of Jared Polis Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

38240.00

1194253.64

(ii) Unitemized.....

9540.51

92929.06

(iii) TOTAL of contributions

47780.51

1287182.70

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

0.00

21250.00

(d) The Candidate.....

79586.14

5750362.67

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))

127366.65

7058795.37

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

5893.01

16778.73

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

2764.47

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

133259.66

7078338.57

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	158909.84	6764770.38
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	2300.00	10203.33
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2300.00	10203.33
21. OTHER DISBURSEMENTS.....	43700.00	179610.50
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	204909.84	6954584.21

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	195404.67
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	133259.66
25. SUBTOTAL (add Line 23 and Line 24).....	328664.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	204909.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	123754.49

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 52  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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 COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.** Full Name (Last, First, Middle Initial)  
Harry Melkonian

Mailing Address PO Box 1893

City Mendocino State CA Zip Code 95460-1893

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation lawyer

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt M M / D D / Y Y Y Y  
10 / 14 / 2008

**Transaction ID:** C4999470

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Gayle J Tauber

Mailing Address 7910 Ivanhoe Ave # 337

City La Jolla State CA Zip Code 92037-4511

FEC ID number of contributing federal political committee. C

Name of Employer none Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt M M / D D / Y Y Y Y  
10 / 14 / 2008

**Transaction ID:** C4999630

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Donna I Frost

Mailing Address 13913 W 58th PI

City Arvada State CO Zip Code 80004-3735

FEC ID number of contributing federal political committee. C

Name of Employer Jovian P4 LLC Occupation Business Manager

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 13148.56

Date of Receipt M M / D D / Y Y Y Y  
10 / 09 / 2008

**Transaction ID:** C4994540

Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 2050.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 52  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.**

Full Name (Last, First, Middle Initial)  
Julie Meko Ascher

Mailing Address 3120 3rd St

City Boulder State CO Zip Code 80304-2541

FEC ID number of contributing federal political committee. C

Name of Employer RE/Max Boulder Occupation realtor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2350.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 8

**Transaction ID:** C4994470

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Ivan Gayler

Mailing Address 1400 Maiden Lane

City Del Mar State CA Zip Code 92014

FEC ID number of contributing federal political committee. C

Name of Employer Corporate Executive Occupation Del Mar Partnership, Inc.

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 8

**Transaction ID:** C4994600

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
William Patrick Krueer

Mailing Address PO Box 434

City Rancho Santa Fe State CA Zip Code 92067

FEC ID number of contributing federal political committee. C

Name of Employer Monarch Group Occupation Real Estate Development

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3300.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 1 4 / 2 0 0 8

**Transaction ID:** C4999321

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 3550.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 52  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.** Full Name (Last, First, Middle Initial)  
Kenneth Leshner

Mailing Address 18 Pittsford Way

City Nanuet State NY Zip Code 10954-3518

FEC ID number of contributing federal political committee. C

Name of Employer NA Occupation retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt MM / DD / YYYY  
10 / 14 / 2008

**Transaction ID:** C4999431

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Gina M. Salazar

Mailing Address 516 W 91st Cir

City Thornton State CO Zip Code 80260-6894

FEC ID number of contributing federal political committee. C

Name of Employer Inclusive Solutions, LLC Occupation owner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 275.00

Date of Receipt MM / DD / YYYY  
10 / 09 / 2008

**Transaction ID:** C4994461

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Nicholas B. Binkley

Mailing Address PO Box 3470

City Rancho Santa Fe State CA Zip Code 92067-3470

FEC ID number of contributing federal political committee. C

Name of Employer Forrest Binkley Brown Occupation Venture Capital

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY  
10 / 14 / 2008

**Transaction ID:** C4999701

Amount of Each Receipt this Period 1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 4050.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Elizabeth L. Byrnes		Date of Receipt MM / DD / YYYY 10 / 14 / 2008
	Mailing Address 4901 Yerba Santa Dr.		Transaction ID: C4999712
	City San Diego	State CA	Zip Code 92115
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Cathy Catanzano		Date of Receipt MM / DD / YYYY 10 / 09 / 2008
	Mailing Address 3609 Hazelwood Court		Transaction ID: C4994552
	City Boulder	State CO	Zip Code 80010
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Blue Mountain Arts	Occupation Operations Director	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Margarete Gaffney		Date of Receipt MM / DD / YYYY 10 / 09 / 2008
	Mailing Address 1400 Maiden Lane		Transaction ID: C4994602
	City Del Mar	State CA	Zip Code 92014
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer N/A	Occupation Homemaker	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 52  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	
							<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.**

Full Name (Last, First, Middle Initial)  
Shun-Yi Lee

Mailing Address 2888 Crystal Ridge Rd.

City State Zip Code  
Diamond Bar CA 91765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pencil LCC Web Software

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
10 / 14 / 2008

Transaction ID: C4999452

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Ralph Gorin

Mailing Address PO Box 2631

City State Zip Code  
Redmond WA 98073-2631

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
XKL, LLC Software Engineer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
10 / 09 / 2008

Transaction ID: C4994423

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

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

Mailing Address 2561 Ranch Reserve Rdg

City State Zip Code  
Westminster CO 80234-2695

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
CO Department of labor and employment n/a

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
10 / 09 / 2008

Transaction ID: C4994533

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 52  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.**

Full Name (Last, First, Middle Initial)  
Steffanie Strathdee

Mailing Address 13342 Benchley Rd.

City State Zip Code  
San Diego CA 92130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Johns Hopkins Bloomberg School of Publ Professor

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 4 / 2 0 0 8

Transaction ID: C4999313

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Kevin W. Sharer

Mailing Address 788 Malcolm Ave

City State Zip Code  
Los Angeles CA 90024-3249

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Amgen CEO

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

Transaction ID: C4991484

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
James Leprino

Mailing Address 1830 W 38th Ave

City State Zip Code  
Denver CO 80211-2225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Leprino Foods Company Chairman

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

Transaction ID: C4991684

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 11 / 52</span> (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Joseph Kellman</p> <p>Mailing Address PO Box 8251 17402 Circa del Norte Lot 184</p> <p>City Rancho Santa Fe State CA Zip Code 92067-8251</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Self Occupation Attorney</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="float: right; border: 1px solid black; padding: 2px;">4600.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p><b>Transaction ID:</b> C4999574</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">2300.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	4	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	4	/	2	0	0	8												

<p><b>B.</b> Full Name (Last, First, Middle Initial) Suzanne Strickland</p> <p>Mailing Address 1070 Darwin Ct</p> <p>City Northglenn State CO Zip Code 80260-5633</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer DJ Strickland P.C. Occupation Bookkeeper</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="float: right; border: 1px solid black; padding: 2px;">1250.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p><b>Transaction ID:</b> C4994554</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">250.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	9	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	0	9	/	2	0	0	8												

<p><b>C.</b> Full Name (Last, First, Middle Initial) Reed Halladay</p> <p>Mailing Address 23449 Oakrun Lane</p> <p>City Newhall State CA Zip Code 91321</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Bel Air Investment Advisors Occupation Investment Advisor</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="float: right; border: 1px solid black; padding: 2px;">3300.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p><b>Transaction ID:</b> C4999315</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">1000.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	4	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	4	/	2	0	0	8												

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">3550.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 52  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.** Full Name (Last, First, Middle Initial)  
Marjorie Hansen Shaevitz

Mailing Address 2671 Greentree Ln

City State Zip Code  
La Jolla CA 92037-1148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-employed Counselor

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 4 / 2 0 0 8

Transaction ID: C4999625

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Arlene Schutz

Mailing Address 145 E 16th St

City State Zip Code  
New York NY 10003-3405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
none Lab Chemist

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 4 / 2 0 0 8

Transaction ID: C4999675

Amount of Each Receipt this Period  
800.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Aline Christianian

Mailing Address 2085 Story Hill Rd.

City State Zip Code  
Boulder CO 80305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
n/a n/a

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 8

Transaction ID: C4994465

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1550.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Donna I Frost	Date of Receipt MM / DD / YYYY 10 / 15 / 2008
	Mailing Address 13913 W 58th Pl	<b>Transaction ID:</b> C5012256
	City Arvada State CO Zip Code 80004-3735	Amount of Each Receipt this Period 356.21
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Exempt Acctg Exp Oct 1-15, 2008
Name of Employer Jovian P4 LLC Occupation Business Manager		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 13148.56	

<b>B.</b>	Full Name (Last, First, Middle Initial) David Hepworth	Date of Receipt MM / DD / YYYY 10 / 06 / 2008
	Mailing Address 7 LedgeWood Ct	<b>Transaction ID:</b> C4991686
	City Norwalk State CT Zip Code 06850-1811	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Sigg USA Occupation Logistics and Customer Service Manager		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 700.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Barbara Kruer	Date of Receipt MM / DD / YYYY 10 / 14 / 2008
	Mailing Address PO Box 434	<b>Transaction ID:</b> C4999396
	City Rancho Santa Fe State CA Zip Code 92067	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Barbara Kruer & Associates Occupation Real Estate		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 52  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.** Full Name (Last, First, Middle Initial)  
Bob Polis

Mailing Address 382 Alpine Way

City Boulder State CO Zip Code 80304-0407

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation real estate

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 10 / 14 / 2008

Transaction ID: C4999586

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Robert Katz

Mailing Address 615 Highland Ave

City Boulder State CO Zip Code 80302-4721

FEC ID number of contributing federal political committee. **C**

Name of Employer Vail Resorts Occupation CEO

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 10 / 09 / 2008

Transaction ID: C4994426

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Marion M. Morgan

Mailing Address 930 28th Street #256

City Boulder State CO Zip Code 80303

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3250.00

Date of Receipt 10 / 09 / 2008

Transaction ID: C4994476

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4850.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 52  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.** Full Name (Last, First, Middle Initial)  
Sally Martin

Mailing Address 1527 48th St.

City Boulder State CO Zip Code 80303

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 283.00

Date of Receipt 10 / 09 / 2008

Transaction ID: C4994486

Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Paul Knutson

Mailing Address 800 Prospect St  
Unit 3D

City La Jolla State CA Zip Code 92037-4204

FEC ID number of contributing federal political committee. **C**

Name of Employer SPS Studios Occupation Accountant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 14 / 2008

Transaction ID: C4999417

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Phyllis F. Epstein

Mailing Address 9802 La Jolla Farms Rd

City La Jolla State CA Zip Code 92037-1135

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 14 / 2008

Transaction ID: C4999717

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 52  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.** Full Name (Last, First, Middle Initial)  
Kristine Rodgers

Mailing Address 21 Washington

City State Zip Code  
Golden CO 80403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jovian P4 LLC Accountant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 8

**Transaction ID:** C4994527

Amount of Each Receipt this Period  
20.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mary L. Walshok

Mailing Address 150 12th St

City State Zip Code  
Del Mar CA 92014-2315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
UC San Diego University Admin

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 4 / 2 0 0 8

**Transaction ID:** C4999458

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Cynthia J Russell

Mailing Address PO Box 20976

City State Zip Code  
Boulder CO 80308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 8

**Transaction ID:** C4994438

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **520.00**

**TOTAL** This Period (last page this line number only) ..... ►



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Valerie Stallings		Date of Receipt MM / DD / YYYY 10 / 14 / 2008
	Mailing Address 10743 Caminito Cascara		<b>Transaction ID:</b> C4999808
	City San Diego	State CA	Zip Code 92108
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Self	Occupation Consultant	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Kristine Rodgers		Date of Receipt MM / DD / YYYY 10 / 15 / 2008
	Mailing Address 21 Washington		<b>Transaction ID:</b> C5012269
	City Golden	State CO	Zip Code 80403
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2540.04
	Name of Employer Jovian P4 LLC	Occupation Accountant	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 73369.62		<b>[MEMO ITEM]</b> * Exempt Acctg Serv Thru 10/15/08

<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas Glass		Date of Receipt MM / DD / YYYY 10 / 06 / 2008
	Mailing Address PO Box 387		<b>Transaction ID:</b> C4991679
	City Frisco	State CO	Zip Code 80443-0387
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer Western Lands Group	Occupation Principle	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 52  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.**

Full Name (Last, First, Middle Initial)  
Alexis Parks

Mailing Address 973 5th St

City State Zip Code  
Boulder CO 80302-7120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Votelink.com President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 0 8

Transaction ID: C4991689

Amount of Each Receipt this Period  
20.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Elaine Galinson

Mailing Address 7919 Prospect Pl

City State Zip Code  
La Jolla CA 92037-3722

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
none none

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 0 8

Transaction ID: C4999639

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Jeanne Krieger

Mailing Address 7332 Island Cir

City State Zip Code  
Boulder CO 80301-3906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BCH-CMSO RN

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 8

Transaction ID: C4994429

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2570.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Emilio Galvan		Date of Receipt
	Mailing Address 505 W. 54th St., #919		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	New York	NY	10019
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C5012590A
Name of Employer Brown Rudnick LLP		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
			* Earmarked Contribution: See Below

<b>B.</b>	Full Name (Last, First, Middle Initial) Actblue		Date of Receipt
	Mailing Address P.O. Box 382110		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Cambridge	MA	02238
	FEC ID number of contributing federal political committee. <b>C</b> C00401224		Transaction ID: C5012590AB
Name of Employer		Occupation Conduit total listed in Agg. field	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 3874.07
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
			<b>[MEMO ITEM]</b> Note: Above Contribution earmarked through this organization.

<b>C.</b>	Full Name (Last, First, Middle Initial) Edward Ayoob		Date of Receipt
	Mailing Address 5509 39th Street NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Washington	DC	20015
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C5012620A
Name of Employer Barnes and Thornburg		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
			* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 750.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 52  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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 COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.** Full Name (Last, First, Middle Initial)  
Actblue  
Mailing Address P.O. Box 382110  
City State Zip Code  
Cambridge MA 02238  
FEC ID number of contributing federal political committee. **C** C00401224  
Name of Employer Occupation  
Conduit total listed in Agg. field  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3874.07  
Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 0 8  
Transaction ID: C5012620AB  
Amount of Each Receipt this Period  
250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
Dennis Briscoe  
Mailing Address 1278 Lambert Cir.  
City State Zip Code  
Lafayette CO 80026  
FEC ID number of contributing federal political committee. **C**  
Name of Employer self Occupation  
consultant  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 8  
Transaction ID: C5012594A  
Amount of Each Receipt this Period  
50.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
\* Earmarked Contribution:  
See Below

**C.** Full Name (Last, First, Middle Initial)  
Actblue  
Mailing Address P.O. Box 382110  
City State Zip Code  
Cambridge MA 02238  
FEC ID number of contributing federal political committee. **C** C00401224  
Name of Employer Occupation  
Conduit total listed in Agg. field  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3874.07  
Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 8 / 2 0 0 8  
Transaction ID: C5012594AB  
Amount of Each Receipt this Period  
50.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 50.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 52  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.** Full Name (Last, First, Middle Initial)  
Jim Butterworth

Mailing Address 2153 Grove Cir W

City State Zip Code  
Boulder CO 80302

FEC ID number of contributing federal political committee. **C**

Name of Employer none Occupation none

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1330.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 8

**Transaction ID:** C4998785A

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

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

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3874.07

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 8

**Transaction ID:** C4998785AB

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
Scott Koski

Mailing Address 735 16th St.

City State Zip Code  
Boulder CO 80302

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation  
Student

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 8 / 2 0 0 8

**Transaction ID:** C5012607A

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **750.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 52

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.**

Full Name (Last, First, Middle Initial)

Actblue

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3874.07

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 8 / 2 0 0 8

Transaction ID: C5012607AB

Amount of Each Receipt this Period

250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

**B.**

Full Name (Last, First, Middle Initial)

Diane Rosenthal

Mailing Address 2945 Lafayette Drive

City State Zip Code  
Boulder CO 80305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1236.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 0 / 2 0 0 8

Transaction ID: C5012618A

Amount of Each Receipt this Period

100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

Actblue

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3874.07

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 0 8

Transaction ID: C5012618AB

Amount of Each Receipt this Period

100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

100.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 52  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.** Full Name (Last, First, Middle Initial)  
Dean Pitchford

Mailing Address 1701 Queens Ct

City State Zip Code  
Los Angeles CA 90069

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation  
self Writer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
10 / 05 / 2008

Transaction ID: C4998789A

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

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

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
10 / 05 / 2008

Transaction ID: C4998789AB

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>38240.00</b>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 52  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.**

Full Name (Last, First, Middle Initial)  
Jared Polis

Mailing Address PO Box 4659

City State Zip Code  
Boulder CO 80306-4659

FEC ID number of contributing federal political committee. **C** C00435370

Name of Employer Occupation  
SPS Studios Entrepreneur

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Amount of Each Receipt this Period  
4199.06

Transaction ID: C5012250

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* In-Kind: Labor Costs Oct 1 - 15, 2008

**B.**

Full Name (Last, First, Middle Initial)  
Jared Polis

Mailing Address PO Box 4659

City State Zip Code  
Boulder CO 80306-4659

FEC ID number of contributing federal political committee. **C** C00435370

Name of Employer Occupation  
SPS Studios Entrepreneur

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Amount of Each Receipt this Period  
89.20

Transaction ID: C5012244

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* In-Kind: Phone Exp - DSL

**C.**

Full Name (Last, First, Middle Initial)  
Jared Polis

Mailing Address PO Box 4659

City State Zip Code  
Boulder CO 80306-4659

FEC ID number of contributing federal political committee. **C** C00435370

Name of Employer Occupation  
SPS Studios Entrepreneur

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Amount of Each Receipt this Period  
141.98

Transaction ID: C5012245

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* In-Kind: Phone Exp - Cellular

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4430.24**

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 52  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.** Full Name (Last, First, Middle Initial)  
Jared Polis

Mailing Address PO Box 4659

City State Zip Code  
Boulder CO 80306-4659

FEC ID number of contributing federal political committee. **C** C00435370

Name of Employer Occupation  
SPS Studios Entrepreneur

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5750362.67

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

**Transaction ID:** C5012248

Amount of Each Receipt this Period  
65.90

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* In-Kind: Printing & Reproduction Exp.

**B.** Full Name (Last, First, Middle Initial)  
Jared Polis

Mailing Address PO Box 4659

City State Zip Code  
Boulder CO 80306-4659

FEC ID number of contributing federal political committee. **C** C00435370

Name of Employer Occupation  
SPS Studios Entrepreneur

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5750362.67

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

**Transaction ID:** C5012248

Amount of Each Receipt this Period  
90.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* In-Kind: Postage Exp

**C.** Full Name (Last, First, Middle Initial)  
Jared Polis

Mailing Address PO Box 4659

City State Zip Code  
Boulder CO 80306-4659

FEC ID number of contributing federal political committee. **C** C00435370

Name of Employer Occupation  
SPS Studios Entrepreneur

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5750362.67

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 0 8

**Transaction ID:** C5013028

Amount of Each Receipt this Period  
75000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **75155.90**

**TOTAL** This Period (last page this line number only) ..... ► **79586.14**

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 52  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

**A.** Full Name (Last, First, Middle Initial)  
Colo Democratic Party

Mailing Address 1904 Pearl St

City State Zip Code  
Boulder CO 80302

FEC ID number of contributing federal political committee. **C** C00161786

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 9749.98

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 8

**Transaction ID:** C5013071

Amount of Each Receipt this Period  
1673.01

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Colo Democratic Party

Mailing Address 1904 Pearl St

City State Zip Code  
Boulder CO 80302

FEC ID number of contributing federal political committee. **C** C00161786

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 9749.98

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 8

**Transaction ID:** C5013064

Amount of Each Receipt this Period  
2520.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Colo Democratic Party

Mailing Address 1904 Pearl St

City State Zip Code  
Boulder CO 80302

FEC ID number of contributing federal political committee. **C** C00161786

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 9749.98

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 8

**Transaction ID:** C5013066

Amount of Each Receipt this Period  
1700.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5893.01**

**TOTAL** This Period (last page this line number only) ..... ► **5893.01**

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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 COMMITTEE (In Full)  
Friends of Jared Polis Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Darrick McCasland</p> <p>Mailing Address 1177 Race St Apt 804</p> <p>City Denver State CO Zip Code 80206-2840</p> <p>Purpose of Disbursement Payroll - Staff</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229810 <b>Date of Disbursement</b> 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 2900.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Pinnacol Assurance</p> <p>Mailing Address PO Box 469011</p> <p>City Denver State CO Zip Code 80246-9011</p> <p>Purpose of Disbursement Insurance - Worker Comp</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229820 <b>Date of Disbursement</b> 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 526.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Progressive Insurance</p> <p>Mailing Address PO Box 30108</p> <p>City Tampa State FL Zip Code 33630-3108</p> <p>Purpose of Disbursement Insurance - Auto</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229860 <b>Date of Disbursement</b> 10 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 583.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4009.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Rocky Mtn Executive Rentals <hr/> Mailing Address 771 Columbine Ct <hr/> City Erie State CO Zip Code 80516 <hr/> Purpose of Disbursement Lease Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229880 Date of Disbursement 10 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 921.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Jared Polis <hr/> Mailing Address PO Box 4659 <hr/> City Boulder State CO Zip Code 80306-4659 <hr/> Purpose of Disbursement Printing & Reproduction Exp. Candidate Name Jared Polis <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 02 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229800 Date of Disbursement 10 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 65.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * In-Kind Received
<b>C.</b>	Full Name (Last, First, Middle Initial) Jared Polis <hr/> Mailing Address PO Box 4659 <hr/> City Boulder State CO Zip Code 80306-4659 <hr/> Purpose of Disbursement Postage Exp Candidate Name Jared Polis <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 02 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229801 Date of Disbursement 10 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 90.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * In-Kind Received

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1077.39

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Dayna Hanson</p> <p>Mailing Address 3503 W 44th Ave</p> <p>City Denver State CO Zip Code 80211</p> <p>Purpose of Disbursement Payroll - Staff</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229811 <b>Date of Disbursement</b> 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 1650.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) XCEL Energy</p> <p>Mailing Address P.O. Box 9477</p> <p>City Minneapolis State MN Zip Code 55484-9477</p> <p>Purpose of Disbursement Utilities / Office Space Exp</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229821 <b>Date of Disbursement</b> 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 421.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Capitol Hill Mansion Bed &amp; Breakfast</p> <p>Mailing Address 1207 Pennsylvania St</p> <p>City Denver State CO Zip Code 80203</p> <p>Purpose of Disbursement Event Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229861 <b>Date of Disbursement</b> 10 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 325.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2396.90

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Campaign Group Inc</p> <p>Mailing Address 1600 Locust St</p> <p>City Philadelphia State PA Zip Code 19103</p> <p>Purpose of Disbursement TV Buy</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229871</p> <p>Date of Disbursement 10 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 75000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) UPS</p> <p>Mailing Address PO Box 577</p> <p>City Carol Stream State IL Zip Code 60132-0001</p> <p>Purpose of Disbursement Mail - Postage &amp; Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229881</p> <p>Date of Disbursement 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 72.78</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jared Polis</p> <p>Mailing Address PO Box 4659</p> <p>City Boulder State CO Zip Code 80306-4659</p> <p>Purpose of Disbursement Labor Costs Oct 1 - 15, 2008</p> <p>Candidate Name Jared Polis</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229802</p> <p>Date of Disbursement 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 4199.06</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>* In-Kind Received</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**79271.84**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Lisa Kaufmann <hr/> Mailing Address 1635 spruce st <hr/> City Boulder State CO Zip Code 80302 <hr/> Purpose of Disbursement Payroll - Staff Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229812 Date of Disbursement 10 / 01 / 2008 <hr/> Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Pitney Bowes <hr/> Mailing Address PO Box 856390 <hr/> City Louisville State KY Zip Code 40285-6390 <hr/> Purpose of Disbursement Maintenance Agreements Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229862 Date of Disbursement 10 / 08 / 2008 <hr/> Amount of Each Disbursement this Period 138.53 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Eldorado Artesian Springs Inc <hr/> Mailing Address PO Box 172526 <hr/> City Denver State CO Zip Code 80217-2526 <hr/> Purpose of Disbursement Food & Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229872 Date of Disbursement 10 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 124.42 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1762.95

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) UPS</p> <p>Mailing Address PO Box 577</p> <p>City Carol Stream State IL Zip Code 60132-0001</p> <p>Purpose of Disbursement Mail - Postage &amp; Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229882</p> <p>Date of Disbursement 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 48.52</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Boulder Daily Camera</p> <p>Mailing Address PO Box 4579</p> <p>City Boulder State CO Zip Code 80306-4579</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229822</p> <p>Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 1886.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc.</p> <p>Mailing Address PO Box 39078</p> <p>City Cambridge State MA Zip Code 02139</p> <p>Purpose of Disbursement Democracy Energy Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D230193</p> <p>Date of Disbursement 10 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 247.54</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2182.06

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

A.	Full Name (Last, First, Middle Initial) Michael C Eck  Mailing Address 230 E 19th Ave #47  City Denver State CO Zip Code 80203  Purpose of Disbursement Payroll - Staff  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229813 Date of Disbursement 10 / 01 / 2008  Amount of Each Disbursement this Period 2150.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Jovian P4, LLC  Mailing Address 1215 Spruce St Ste 201  City Boulder State CO Zip Code 80302  Purpose of Disbursement Lease - Phone System  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229823 Date of Disbursement 10 / 01 / 2008  Amount of Each Disbursement this Period 40.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Pitney Bowes  Mailing Address PO Box 856390  City Louisville State KY Zip Code 40285-6390  Purpose of Disbursement Bank - Fees & Finance Charges  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229863 Date of Disbursement 10 / 08 / 2008  Amount of Each Disbursement this Period 9.99  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶

2199.99

TOTAL This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Green Building Svcs</p> <p>Mailing Address 4192 Greenbriar Blvd</p> <p>City Boulder State CO Zip Code 80305</p> <p>Purpose of Disbursement Utilities / Office Space Exp</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229883</p> <p>Date of Disbursement 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 101.71</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) NGP Software</p> <p>Mailing Address 1101 Vermont Ave NW Ste710</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229873</p> <p>Date of Disbursement 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Wells Fargo ExpressPay MN</p> <p>Mailing Address 1650 W 82nd St Ste 300</p> <p>City Bloomington State MN Zip Code 55431</p> <p>Purpose of Disbursement Payroll - Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229814</p> <p>Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 1054.23</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2655.94

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 35 / 52

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mark Kalinoski / LANDLORD <hr/> Mailing Address 852 Willobe Wy <hr/> City Golden State CO Zip Code 80401-8026 <hr/> Purpose of Disbursement Office Rent - Adams County Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D229824 Date of Disbursement 10 / 01 / 2008 <hr/> Amount of Each Disbursement this Period 1333.17 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Lewan & Associates Inc <hr/> Mailing Address PO Box 22855 <hr/> City Denver State CO Zip Code 80222 <hr/> Purpose of Disbursement Maintenance Agreements Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D229864 Date of Disbursement 10 / 08 / 2008 <hr/> Amount of Each Disbursement this Period 338.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) XCEL Energy <hr/> Mailing Address P.O. Box 9477 <hr/> City Minneapolis State MN Zip Code 55484-9477 <hr/> Purpose of Disbursement Utilities / Office Space Exp Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D229874 Date of Disbursement 10 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 55.81 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**1726.98**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) City Club</p> <p>Mailing Address 885 Arapahoe Ave</p> <p>City Boulder State CO Zip Code 80302</p> <p>Purpose of Disbursement Event Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229884 <b>Date of Disbursement</b> 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Andy Szekeres</p> <p>Mailing Address 969 Downing St 310</p> <p>City Denver State CO Zip Code 80218</p> <p>Purpose of Disbursement Payroll - Staff</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229805 <b>Date of Disbursement</b> 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ringsby Family Ltd</p> <p>Mailing Address 4710 Table Mesa Dr Ste A</p> <p>City Boulder State CO Zip Code 80305</p> <p>Purpose of Disbursement Office Rent - Boulder County</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229825 <b>Date of Disbursement</b> 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 4050.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

8450.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

A.	Full Name (Last, First, Middle Initial) UPS		Transaction ID: D229865	
	Mailing Address PO Box 577		Date of Disbursement 10 / 08 / 2008	
	City Carol Stream	State IL	Zip Code 60132-0001	Amount of Each Disbursement this Period 51.38
	Purpose of Disbursement Mail - Postage & Shipping		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				

B.	Full Name (Last, First, Middle Initial) XCEL Energy		Transaction ID: D229875	
	Mailing Address P.O. Box 9477		Date of Disbursement 10 / 15 / 2008	
	City Minneapolis	State MN	Zip Code 55484-9477	Amount of Each Disbursement this Period 87.37
	Purpose of Disbursement Utilities / Office Space Exp		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				

C.	Full Name (Last, First, Middle Initial) XCEL Energy		Transaction ID: D229885	
	Mailing Address P.O. Box 9477		Date of Disbursement 10 / 15 / 2008	
	City Minneapolis	State MN	Zip Code 55484-9477	Amount of Each Disbursement this Period 851.52
	Purpose of Disbursement Utilities / Office Space Exp		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	990.27
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Wells Fargo ExpressPay MN</p> <p>Mailing Address 1650 W 82nd St Ste 300</p> <p>City Bloomington State MN Zip Code 55431</p> <p>Purpose of Disbursement Payroll - Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229815 <b>Date of Disbursement</b> 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 98.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bryan W Finken</p> <p>Mailing Address 2168 S Everett St</p> <p>City Lakewood State CO Zip Code 80227-2331</p> <p>Purpose of Disbursement Payroll - Staff</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229806 <b>Date of Disbursement</b> 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 350.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) QWest</p> <p>Mailing Address PO Box 173638</p> <p>City Denver State CO Zip Code 80217-3638</p> <p>Purpose of Disbursement Phone - Landlines</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229816 <b>Date of Disbursement</b> 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 338.72</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

787.62

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Washington Promo (DemStore)</p> <p>Mailing Address 5125 MacArthur Blvd NW Ste 14</p> <p>City Washington State DC Zip Code 20016</p> <p>Purpose of Disbursement Printing &amp; Promo Items</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229876</p> <p>Date of Disbursement 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 4963.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) UPS</p> <p>Mailing Address PO Box 577</p> <p>City Carol Stream State IL Zip Code 60132-0001</p> <p>Purpose of Disbursement Mail - Postage &amp; Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229866</p> <p>Date of Disbursement 10 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 70.01</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Caitlin Leahy</p> <p>Mailing Address 2330 N. 86th St.</p> <p>City Wauwatosa State WI Zip Code 53226</p> <p>Purpose of Disbursement Payroll - Staff</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229807</p> <p>Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 2150.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

7183.82

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 52

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Pitney Bowes - Purchase Power  Mailing Address PO Box 856042  City Louisville State KY Zip Code 40285-6042  Purpose of Disbursement Mail - Postage & Shipping Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229817 Date of Disbursement 10 / 01 / 2008  Amount of Each Disbursement this Period 800.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) The Vintage at Hyland Hills  Mailing Address 4901 W 93rd Ave  City Westminster State CO Zip Code 80031-6319  Purpose of Disbursement Lease Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229827 Date of Disbursement 10 / 01 / 2008  Amount of Each Disbursement this Period 1190.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Auburn Quad, Inc.  Mailing Address PO Box 39078  City Cambridge State MA Zip Code 02139  Purpose of Disbursement ActBlue Processing Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229867 Date of Disbursement 10 / 08 / 2008  Amount of Each Disbursement this Period 50.11  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2040.11

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

A.	Full Name (Last, First, Middle Initial) CORT Furniture Rental  Mailing Address 15845 E 32nd Ave Ste E  City Aurora State CO Zip Code 80011-1571  Purpose of Disbursement Furniture Rental Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229877 Date of Disbursement 10 / 15 / 2008  Amount of Each Disbursement this Period 285.11  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Jared Polis  Mailing Address PO Box 4659  City Boulder State CO Zip Code 80306-4659  Purpose of Disbursement Phone Exp - DSL Candidate Name Jared Polis Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 02  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229798 Date of Disbursement 10 / 07 / 2008  Amount of Each Disbursement this Period 89.20  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  * In-Kind Received
C.	Full Name (Last, First, Middle Initial) Daniel J. Cunny  Mailing Address 5512 Liam Court  City Carpentersville State IL Zip Code 60110  Purpose of Disbursement Payroll - Staff Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229808 Date of Disbursement 10 / 01 / 2008  Amount of Each Disbursement this Period 250.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**624.31**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Pitney Bowes - Purchase Power</p> <p>Mailing Address PO Box 856042</p> <p>City Louisville State KY Zip Code 40285-6042</p> <p>Purpose of Disbursement Bank - Fees &amp; Finance Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229818</p> <p>Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 18.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc.</p> <p>Mailing Address PO Box 39078</p> <p>City Cambridge State MA Zip Code 02139</p> <p>Purpose of Disbursement ActBlue Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229828</p> <p>Date of Disbursement 10 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 73.61</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) C &amp; D Printing</p> <p>Mailing Address 5351 Tennyson St #1C</p> <p>City Denver State CO Zip Code 80212-4065</p> <p>Purpose of Disbursement Printing and Reproduction</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229858</p> <p>Date of Disbursement 10 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 275.87</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

368.47

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

A.

Full Name (Last, First, Middle Initial)  
Mission Control

Mailing Address 201 Adams St

City Manchester State CT Zip Code 06042

Purpose of Disbursement

Direct Mailing

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D229878

Date of Disbursement

10 / 15 / 2008

Amount of Each Disbursement this Period

17000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Jared Polis

Mailing Address PO Box 4659

City Boulder State CO Zip Code 80306-4659

Purpose of Disbursement

Phone Exp - Cellular

Candidate Name

Jared Polis

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: CO District: 02

Transaction ID: D229799

Date of Disbursement

10 / 07 / 2008

Amount of Each Disbursement this Period

141.98

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

\* In-Kind Received

C.

Full Name (Last, First, Middle Initial)  
Danielle E Oliveto

Mailing Address 11783 W 84th Pl

City Arvada State CO Zip Code 80005

Purpose of Disbursement

Payroll - Staff

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D229809

Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

350.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

17491.98

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

A.	Full Name (Last, First, Middle Initial) Anthem	Transaction ID: D229819 Date of Disbursement 10 / 01 / 2008
	Mailing Address PO Box 541013	Amount of Each Disbursement this Period 1687.35
	City Los Angeles State CA Zip Code 90054-1013	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Insurance - Health/Dental	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Auburn Quad, Inc.	Transaction ID: D229869 Date of Disbursement 10 / 12 / 2008
	Mailing Address PO Box 39078	Amount of Each Disbursement this Period 29.39
	City Cambridge State MA Zip Code 02139	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement ActBlue Processing Fees	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mission Control	Transaction ID: D229879 Date of Disbursement 10 / 15 / 2008
	Mailing Address 201 Adams St	Amount of Each Disbursement this Period 17000.00
	City Manchester State CT Zip Code 06042	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Direct Mailing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>18716.74</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

A.

Full Name (Last, First, Middle Initial)  
FRONTIER AIR

Mailing Address Frontier Center One 7001 Tower Roa

City State Zip Code  
Denver CO 80249-7312

Purpose of Disbursement  
Staff - Transportation

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D229840  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	0	8

Amount of Each Disbursement this Period

149.69
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Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
DIA PARKING

Mailing Address Denver Int'l Airport 8500 Pe?a Blv

City State Zip Code  
Denver CO 80249-6340

Purpose of Disbursement  
Parking

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D229832  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	0	8

Amount of Each Disbursement this Period

34.00
-------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
PROFLOWERS.COM

Mailing Address 5005 Wateridge Vista Dr

City State Zip Code  
San Diego CA 92121

Purpose of Disbursement  
Event Expenses

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D229842  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	0	8

Amount of Each Disbursement this Period

63.90
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Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ►

0.00
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TOTAL This Period (last page this line number only) ..... ►

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

A.	Full Name (Last, First, Middle Initial) St Julien Hotel & Spa Mailing Address Attn Accounting Dept 900 Walnut St City Boulder State CO Zip Code 80302 Purpose of Disbursement Event Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229833 Date of Disbursement 10 / 08 / 2008 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) OFFICE DEPOT STORE #170 Mailing Address STORE #170 City BOULDER State CO Zip Code 80301 Purpose of Disbursement Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229834 Date of Disbursement 10 / 08 / 2008 Amount of Each Disbursement this Period 110.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) PROFLOWERS.COM Mailing Address 5005 Wateridge Vista Dr City San Diego State CA Zip Code 92121 Purpose of Disbursement Event Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D229854 Date of Disbursement 10 / 08 / 2008 Amount of Each Disbursement this Period 65.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

A.	Full Name (Last, First, Middle Initial) HOTELS.COM	Transaction ID: D229835 Date of Disbursement 10 / 08 / 2008
	Mailing Address 10440 N Central Expy Ste 400	Amount of Each Disbursement this Period 149.52
	City Dallas State TX Zip Code 75231-2228	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement Candidate - Lodging Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) The Churchill Hotel	Transaction ID: D229845 Date of Disbursement 10 / 08 / 2008
	Mailing Address 1914 Connecticut Ave NW	Amount of Each Disbursement this Period 108.85
	City Washington State DC Zip Code 20009	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement Meals Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) HOTELS.COM	Transaction ID: D229836 Date of Disbursement 10 / 08 / 2008
	Mailing Address 10440 N Central Expy Ste 400	Amount of Each Disbursement this Period 149.52
	City Dallas State TX Zip Code 75231-2228	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement Staff - Lodging Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

A.	Full Name (Last, First, Middle Initial) The Churchill Hotel	Transaction ID: D229846 Date of Disbursement 10 / 08 / 2008
	Mailing Address 1914 Connecticut Ave NW	Amount of Each Disbursement this Period 47.54
	City Washington State DC Zip Code 20009	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Meals	<b>[MEMO ITEM]</b>
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) HOTELS.COM	Transaction ID: D229837 Date of Disbursement 10 / 08 / 2008
	Mailing Address 10440 N Central Expy Ste 400	Amount of Each Disbursement this Period 446.40
	City Dallas State TX Zip Code 75231-2228	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Staff - Lodging	<b>[MEMO ITEM]</b>
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) FRONTIER AIR	Transaction ID: D229838 Date of Disbursement 10 / 08 / 2008
	Mailing Address Frontier Center One 7001 Tower Roa	Amount of Each Disbursement this Period 159.40
	City Denver State CO Zip Code 80249-7312	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Staff - Transportation	<b>[MEMO ITEM]</b>
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ..... ▶

0.00

TOTAL This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

A.	Full Name (Last, First, Middle Initial) DIA PARKING	Transaction ID: D229848 Date of Disbursement 10 / 08 / 2008
	Mailing Address Denver Int'l Airport 8500 Pe?a Blv	Amount of Each Disbursement this Period 72.00
	City Denver State CO Zip Code 80249-6340	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement Parking Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) COSMOS PIZZA	Transaction ID: D229829 Date of Disbursement 10 / 08 / 2008
	Mailing Address 1325 Broadway St WILLIAMS VILLAGE	Amount of Each Disbursement this Period 175.87
	City Boulder State CO Zip Code 80302-6200	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement Food & Catering Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) FRONTIER AIR	Transaction ID: D229839 Date of Disbursement 10 / 08 / 2008
	Mailing Address Frontier Center One 7001 Tower Roa	Amount of Each Disbursement this Period 271.38
	City Denver State CO Zip Code 80249-7312	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement Staff - Transportation Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

158751.84

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input checked="" type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

A.

Full Name (Last, First, Middle Initial)  
Andrew Viterbi

Mailing Address 2712 Glenwick Pl.

City State Zip Code  
La Jolla CA 92037

Purpose of Disbursement  
Refund of Excessive Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D229972

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends of Jared Polis Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Colorado Democratic Party</p> <p>Mailing Address 777 Santa Fe Drive</p> <p>City Denver State CO Zip Code 80204</p> <p>Purpose of Disbursement CO Democratic Party - Other</p> <p>Candidate Name Colorado Democratic Party</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229870 <b>Date of Disbursement</b> 10 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 40000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ringsby Family Ltd</p> <p>Mailing Address 4710 Table Mesa Dr Ste A</p> <p>City Boulder State CO Zip Code 80305</p> <p>Purpose of Disbursement Inkind - CO Dem Party</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229826 <b>Date of Disbursement</b> 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 1700.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) TITUS, DINA</p> <p>Mailing Address 3711 E Sunset Rd Ste C</p> <p>City Las Vegas State NV Zip Code 89120-6212</p> <p>Purpose of Disbursement Candidate Committee</p> <p>Candidate Name Dina Titus</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D229886 <b>Date of Disbursement</b> 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>43700.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>43700.00</b>