

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than 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

JARED POLIS MAJORITY FUND

ADDRESS (number and street) P.O. BOX 1174

Check if different than previously reported. (ACC) %Whitney Burns

SPRINGFIELD VA 22151

2. **FEC IDENTIFICATION NUMBER** C00479139

3. IS THIS REPORT NEW (N) OR AMENDED (A)

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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on _____ in the State of _____

(d) 30-Day Post -Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on _____ in the State of _____

5. Covering Period 04 01 2010 through 06 30 2010

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 Polly B. Baca

Signature of Treasurer Electronically Filed by Polly B. Baca Date 07 05 2010

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

Office Use Only							
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FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
JARED POLIS MAJORITY FUND

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		0.00
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	3777.41									
(c) Total Receipts (from Line 19)	19850.00	25740.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	23627.41	25740.00								
7. Total Disbursements (from Line 31)	8264.22	10376.81								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	15363.19	15363.19								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

JARED POLIS MAJORITY FUND

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	14350.00	17650.00
(ii) Unitemized	0.00	590.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	14350.00	18240.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	5500.00	7500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	19850.00	25740.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	19850.00	25740.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	19850.00	25740.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	2264.22	2376.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2264.22	2376.81
22. Transfers to Affiliated/Other Party Committees.....	6000.00	8000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	8264.22	10376.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8264.22	10376.81

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 20

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	19850.00	25740.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19850.00	25740.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2264.22	2376.81
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2264.22	2376.81

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
JARED POLIS MAJORITY FUND

A. Full Name (Last, First, Middle Initial)
 Bernyce Adler
 Mailing Address 10101 Collins Avenue #16E
 City State Zip Code
 Miami Beach FL 33154
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 7 / 2 0 1 0
Transaction ID: SA11AI.4190
 Amount of Each Receipt this Period
 500.00
 Conduit: ActBlue
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

B. Full Name (Last, First, Middle Initial)
 Matthew Adler
 Mailing Address 1400 NW 107 Avenue
 City State Zip Code
 Doral FL 33172
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 6 / 2 0 1 0
Transaction ID: SA11AI.4192
 Amount of Each Receipt this Period
 500.00
 Conduit: ActBlue
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Adler Group Inc. Executive Vice President
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

C. Full Name (Last, First, Middle Initial)
 Eduardo J. Arriola
 Mailing Address 1516 Certosa Avenue
 City State Zip Code
 Coral Gables FL 33146
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 4 / 2 0 1 0
Transaction ID: SA11AI.4200
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Apollo Bankshares Chairman & CEO
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

A.

Full Name (Last, First, Middle Initial)
Howard M. Bard

Mailing Address 1726 21st Street NW

City Washington State DC Zip Code 20009

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

Name of Employer Sievin & Hart Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 22 / 2010

Transaction ID: SA11AI.4210

Amount of Each Receipt this Period 250.00

B.

Full Name (Last, First, Middle Initial)
Matan Ben-Aviv

Mailing Address 3101 S. Ocean Drive #2406

City Hollywood State FL Zip Code 33019

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

Name of Employer Ganot Corporation Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2010

Transaction ID: SA11AI.4182

Amount of Each Receipt this Period 250.00

Conduit: ActBlue

C.

Full Name (Last, First, Middle Initial)
Sabine Bittel

Mailing Address 801 Arthur Godfrey Road #600

City Miami Beach State FL Zip Code 33140

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

Name of Employer Pinecrest Elementary School Occupation Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 09 / 2010

Transaction ID: SA11AI.4186

Amount of Each Receipt this Period 1000.00

Conduit: ActBlue

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 8 / 20
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

A.	Full Name (Last, First, Middle Initial) David Briggs	Date of Receipt MM / DD / YYYY 06 / 13 / 2010
	Mailing Address 1924 North Ode Street	Transaction ID: SA11AI.4206
	City State Zip Code Arlington VA 22209	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Conduit: ActBlue
	Name of Employer Occupation Holland & Knight Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) John C. Burchett	Date of Receipt MM / DD / YYYY 06 / 22 / 2010
	Mailing Address 2020 12th Street NW #406	Transaction ID: SA11AI.4212
	City State Zip Code Washington DC 20009	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Google Policy Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) James M. Delaplaine, Jr.	Date of Receipt MM / DD / YYYY 06 / 22 / 2010
	Mailing Address 4421 45th Street NW	Transaction ID: SA11AI.4214
	City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Davis & Harman Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

A. Full Name (Last, First, Middle Initial)
Joseph Falk

Mailing Address 1770 Micanopy Avenue

City State Zip Code
Miami FL 33133

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

Name of Employer Occupation
Akerman Sentenfill Special Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2010

Transaction ID: SA11AI.4188

Amount of Each Receipt this Period
1000.00

Conduit: ActBlue

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

Mailing Address P.O. Box 398024

City State Zip Code
Miami Beach FL 33239

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

Name of Employer Occupation
Self-employed Entrepreneur

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2010

Transaction ID: SA11AI.4194

Amount of Each Receipt this Period
1000.00

Conduit: ActBlue

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

Mailing Address 1504 Island Boulevard

City State Zip Code
Aventura FL 33160

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

Name of Employer Occupation
Wells Fargo Banking Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2010

Transaction ID: SA11AI.4184

Amount of Each Receipt this Period
250.00

Conduit: ActBlue

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 20
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

A.

Full Name (Last, First, Middle Initial)
Alexander Heckler

Mailing Address 200 East Broward Blvd., #2100

City State Zip Code
Ft. Lauderdale FL 33301

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
LSN Partners Managing Partners

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 23 / 2010

Transaction ID: SA11AI.4198

Amount of Each Receipt this Period 2500.00

Conduit: ActBlue

B.

Full Name (Last, First, Middle Initial)
John Michael Hogan

Mailing Address 114 3rd Terrace San Marino Island

City State Zip Code
Miami Beach FL 33139

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Holland & Knight Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 24 / 2010

Transaction ID: SA11AI.4202

Amount of Each Receipt this Period 1000.00

C.

Full Name (Last, First, Middle Initial)
Robert Keast

Mailing Address 1635 R Street NW #12

City State Zip Code
Washington DC 20009

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Third Way Outreach Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 27 / 2010

Transaction ID: SA11AI.4224

Amount of Each Receipt this Period 250.00

Conduit: ActBlue

SUBTOTAL of Receipts This Page (optional)	3750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

A.	Full Name (Last, First, Middle Initial) Joan Klipping		Date of Receipt	
	Mailing Address P.O. Box 61522		M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.4204
	Denver	CO	80206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Self-employed		Occupation Artist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

B.	Full Name (Last, First, Middle Initial) Chrys Lemon		Date of Receipt	
	Mailing Address 1600 N. Oak Street #628		M M / D D / Y Y Y Y Y 0 6 / 2 7 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.4226
	Arlington	VA	22209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer McIntyre & Lemon		Occupation Attorney		Conduit: ActBlue
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) Peter A. Leon		Date of Receipt	
	Mailing Address 2006 Columbia Road NW #7		M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11AI.4216
	Washington	DC	20009	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer DowLohnes Government Strategies		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 20
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

A.

Full Name (Last, First, Middle Initial)
Robert Raben

Mailing Address 213 E Street NE

City State Zip Code
Washington DC 20002

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

Name of Employer Self-employed Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2010

Transaction ID: SA11AI.4208

Amount of Each Receipt this Period
1000.00

Conduit: ActBlue

B.

Full Name (Last, First, Middle Initial)
Aubrey Sarvis

Mailing Address 2800 O Street NW

City State Zip Code
Washington DC 20007

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

Name of Employer Service Members Legal Defense Network Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2010

Transaction ID: SA11AI.4218

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Gigi Beth Sohn

Mailing Address 3503 Alton Place NW

City State Zip Code
Washington DC 20008

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

Name of Employer Public Knowledge Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2010

Transaction ID: SA11AI.4220

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

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

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

FOR LINE NUMBER: PAGE 13 / 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

A.

Full Name (Last, First, Middle Initial)

Andrew Tobias

Mailing Address 787 NE 71st Street

City State Zip Code
Miami Beach FL 33138

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

Name of Employer Occupation
Self-employed Writer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.4196

Amount of Each Receipt this Period

1000.00

Conduit: ActBlue

B.

Full Name (Last, First, Middle Initial)

Paul Wolfson

Mailing Address 1509 Church Street NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Wilmer Hale Lawyer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.4222

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

14350.00

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

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

FOR LINE NUMBER: PAGE 14 / 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

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
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 0
Transaction ID: SA11C.4180
Amount of Each Receipt this Period
10000.00
Total Received Through Conduit This Period
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
American Intellectual Property Law Association PAC
Mailing Address 241 18th Street South, #700
City State Zip Code
Arlington VA 22202
FEC ID number of contributing federal political committee. **C** C00156935
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 1 0
Transaction ID: SA11C.4228
Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Level 3 Communications Inc. PAC
Mailing Address 1025 El Dorado Blvd.
City State Zip Code
Broomfield CO 80021
FEC ID number of contributing federal political committee. **C** C00347385
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 0
Transaction ID: SA11C.4232
Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► 3000.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 15 / 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

A.

Full Name (Last, First, Middle Initial)
Nationwide Mutual Insurance Co. PAC

Mailing Address One Nationwide Plaza

City State Zip Code
Columbus OH 43215

FEC ID number of contributing federal political committee. **C** C00076174

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

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

Transaction ID: SA11C.4230

Amount of Each Receipt this Period
2000.00

B.

Full Name (Last, First, Middle Initial)
Security Service Federal Credit Union PAC

Mailing Address 16211 La Cantera Parkway

City State Zip Code
San Antonio TX 78256

FEC ID number of contributing federal political committee. **C** C00360610

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 1 0

Transaction ID: SA11C.4234

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	5500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

A.	Full Name (Last, First, Middle Initial) ActBlue Technical Services Mailing Address 14 Arrow Street City Cambridge State MA Zip Code 02138 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4165 Date of Disbursement 05 / 16 / 2010 Amount of Each Disbursement this Period 79.00
B.	Full Name (Last, First, Middle Initial) ActBlue Technical Services Mailing Address 14 Arrow Street City Cambridge State MA Zip Code 02138 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4167 Date of Disbursement 05 / 23 / 2010 Amount of Each Disbursement this Period 177.75
C.	Full Name (Last, First, Middle Initial) ActBlue Technical Services Mailing Address 14 Arrow Street City Cambridge State MA Zip Code 02138 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4168 Date of Disbursement 06 / 13 / 2010 Amount of Each Disbursement this Period 9.88

SUBTOTAL of Disbursements This Page (optional) ▶	266.63
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

A.	Full Name (Last, First, Middle Initial) ActBlue Technical Services	Transaction ID: SB21B.4172
	Mailing Address 14 Arrow Street	Date of Disbursement 06 / 20 / 2010
	City Cambridge State MA Zip Code 02138	Amount of Each Disbursement this Period 39.50
	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ActBlue Technical Services	Transaction ID: SB21B.4179
	Mailing Address 14 Arrow Street	Date of Disbursement 06 / 27 / 2010
	City Cambridge State MA Zip Code 02138	Amount of Each Disbursement this Period 29.63
	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bienvenu Catering	Transaction ID: SB21B.4173
	Mailing Address P.O. Box 21610	Date of Disbursement 06 / 24 / 2010
	City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period 1405.00
	Purpose of Disbursement Catering	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ► **1474.13**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 20

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

A.

Full Name (Last, First, Middle Initial)
Perkins Coie

Mailing Address 607 14th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal Services

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4169

Date of Disbursement

06 / 15 / 2010

Amount of Each Disbursement this Period

378.20

SUBTOTAL of Disbursements This Page (optional)

378.20

TOTAL This Period (last page this line number only)

2118.96

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

A.

Full Name (Last, First, Middle Initial)
CICILLINE COMMITTEE

Transaction ID: SB22.4178
Date of Disbursement

Mailing Address 102 Waterman St, Suite 2

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	0

City Providence State RI Zip Code 02906

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
Joint Fundraising Proceeds

Category/ Type

Candidate Name
DAVID N CICILLINE

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: RI District: 01

B.

Full Name (Last, First, Middle Initial)
FRIENDS OF JARED POLIS COMMITTEE

Transaction ID: SB22.4175
Date of Disbursement

Mailing Address P.O. Box 4572
Ste A

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	0

City Boulder State CO Zip Code 80306

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Joint Fundraising Proceeds

Category/ Type

Candidate Name
JARED POLIS

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CO District: 02

C.

Full Name (Last, First, Middle Initial)
MARKEY FOR CONGRESS

Transaction ID: SB22.4177
Date of Disbursement

Mailing Address PO Box 1333

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	0

City Fort Collins State CO Zip Code 80521

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Joint Fundraising Proceeds

Category/ Type

Candidate Name
BETSY MARKEY

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: CO District: 04

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 20

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
JARED POLIS MAJORITY FUND

A.	Full Name (Last, First, Middle Initial) SCOTT MURPHY FOR CONGRESS		Transaction ID: SB22.4176	
	Mailing Address 5 South Side Dr #224		Date of Disbursement 06 / 30 / 2010	
	City Clifton Park	State NY	Zip Code 12065	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement Joint Fundraising Proceeds		Category/ Type	
	Candidate Name SCOTT M MURPHY			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: NY	District: 20		

SUBTOTAL of Disbursements This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	6000.00