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OFFICIAL CANDIDATE COMMITTEE
Contributions & Expenditures Statement
 City of Boulder Form 13-2-8, BRC, 1981

Shaun Coleman for Boulder City Council	035
Name of Official Candidate Committee	Committee ID #

The information contained in this filing is true and correct to the best of my knowledge.

	10-9-07
Signature of Treasurer	Date Submitted

9-24-07	9-24-07	10-9-07
Date Last C&E Filed	This C&E FROM	TO

Check appropriate box. Include information as of *at least* 5 p.m. two days prior to the filing. See 13-2-15, BRC, 1981 for more information.

- | | | |
|-------------------------------------|--------------------------|---|
| Initial Filing | Amended Filing | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 3 days after the committee accepts a contribution or makes an expenditure |
| <input type="checkbox"/> | <input type="checkbox"/> | October 9, 2007 |
| <input type="checkbox"/> | <input type="checkbox"/> | October 23, 2007 |
| <input type="checkbox"/> | <input type="checkbox"/> | Thursday before election (November 1) |
| <input type="checkbox"/> | <input type="checkbox"/> | 30th day after election (December 6) |

	Expenditures	Contributions	Matching Funds	Candidate's Contributions
Previous Total	0	200		50
Total for this Period	390	326.69		125
New Total	390	526.69		

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| | Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Participating in Matching Funds Program |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Mail Check - If no, who is authorized to pick up check? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Anonymous Contributions to Report |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Excess Contribution Refunds to Report |

OFFICIAL CANDIDATE COMMITTEE - Contributions Detail

Sharon Collman for Boulder City Council	035
Name of Official Candidate Committee	Committee ID #

Description Key	M=Monetary I=In-Kind CC= Charge Card Purchase or Loan C=Candidate's Contribution	E=Excess Contribution Refunded CCR=Charge Card Purchase or Loan Reimbursed
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Name Su Tape	Date 10-3	Description(s) M
Address 955 S. 95th St	Amount 50.69	Total-to-Date 50.69
City Boulder State CO Zip 80305	Check # 64	Amount to Match
Name Chris Morrison	Date 10-3	Description(s) M
Address 9100 Aurora Ave	Amount 50	Total-to-Date 50
City Boulder State CO Zip 80303	Check # 2252	Amount to Match
Name Crystal Gray	Date 11-3	Description(s) M
Address 1709 Spruce	Amount 25	Total-to-Date 25
City Boulder State CO Zip 80302	Check # 9426	Amount to Match
Name John Spitzer	Date 10-3	Description(s) M
Address 1709 Spruce	Amount 25	Total-to-Date 25
City Boulder State CO Zip 80302	Check # 9426	Amount to Match
Name Lori Fuller	Date 10-3	Description(s) M
Address 2995 Carnyia	Amount 25	Total-to-Date 25
City Boulder State CO Zip	Check # 2025	Amount to Match
Name Maggie Fuller	Date 10-3	Description(s) M
Address 2995 Carnyia	Amount 25	Total-to-Date 25
City Boulder State CO Zip	Check # 2024	Amount to Match

	Contributions	Matching Funds
Page Sub-Total	201.62	
Previous Page Cumulative Total		
New Cumulative Total	201.62	

OFFICIAL CANDIDATE COMMITTEE - Expenditure Detail

Shrum Campaign for Boulder City Council	035
Name of Official Candidate Committee	Committee ID #

Organization Name <i>Colorado Daily</i> Address <i>2616 Pearl St</i> City <i>Boulder</i> State <i>CO</i> Zip Code <i>80302</i>	Date <i>10-5</i> Purpose <i>Advertising</i> Check # Charge Card Amount <i>265</i>
Organization Name <i>First Baptist Church</i> Address <i>1237 Pine</i> City <i>Boulder</i> State <i>CO</i> Zip Code <i>80302</i>	Date <i>10-9</i> Purpose <i>Revised Q+A</i> Check # Charge Card Amount <i>128</i>
Organization Name Address City State Zip Code	Date Purpose Check # Charge Card Amount
Organization Name Address City State Zip Code	Date Purpose Check # Charge Card Amount
Organization Name Address City State Zip Code	Date Purpose Check # Charge Card Amount
Organization Name Address City State Zip Code	Date Purpose Check # Charge Card Amount
Organization Name Address City State Zip Code	Date Purpose Check # Charge Card Amount
Organization Name Address City State Zip Code	Date Purpose Check # Charge Card Amount
Organization Name Address City State Zip Code	Date Purpose Check # Charge Card Amount

Page Sub-Total	<i>390</i>
Previous Page Sub-Total	
New Cumulative Total	<i>390</i>