



Received 10/17/23
J. Small

REPORT OF CONTRIBUTIONS AND EXPENDITURES
(1-45-108, C.R.S.)

Full Name of Committee/Person:	TIM LONG for NORTH GLENN MAYOR Campaign Committee
As Shown On Registration	
Address of Committee/Person:	10661 UTRILLO LANE
City, State & Zip Code:	NORTH GLENN, COLORADO 80234
Committee Type:	CAMPAIGN COMMITTEE
Name and Address of Financial Institution	WELLS FARGO BANK 12000 PECOS ST. WESTMINSTER CO 80234

SOS ID NUMBER (state and county committees):

Type of Report



Regularly Scheduled Filing.



Amended Filing. This amends previous report filed on (date)

Submit changes or new information ONLY



Termination Report. (Termination Reports MUST Have a Monetary Balance of Zero in Line 5)



Check this box if this Report Contains Electioneering Communications Information

Reporting Period Covered:

08/17/2023

Date

Through

10/12/2023

Date

Declared Total Spending (if applicable)

[Art. XXVIII, Sec. 4(1)]

\$

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ -0-
2	Total Monetary Contributions (line 11)	\$ 4,600.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 4,600.00
4	Total Monetary Expenditures (line 19)	\$ 2,440.60
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 2,159.40

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.
[Art. XXVIII Sec. 10(2)(a)]

Authorization (Must be completed by either the Registered Agent **OR** the Candidate): I hereby certify and declare, under penalty of perjury, that to the best of my knowledge or belief all contributions received during this reporting period, including any contributions received in the form of membership dues transferred by a membership organization, are from permissible sources.

Print Registered Agent's Name:

TIMOTHY LOUIS LONG

Registered Agent's Signature:

Timothy L. Long

Date: 10/17/23

Print Candidate Name:

TIM LONG

Candidates Signature:

Timothy L. Long

Date: 10/17/23

DETAILED SUMMARYFull Name of Committee/Person: TIM LONG for NORTHGLENN MAYOR CAMPAIGN COMMITTEECurrent Reporting Period: 08/17/2023Through 10/12/2023

Funds on hand at the beginning of reporting period (Monetary Only)		\$ 500.00
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 4,600.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ - 0 -
8	Loans Received (Please list on Schedule "C")	\$ - 0 -
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ - 0 -
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ - 0 -
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 4,600.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ - 0 -
13	Total Contributions (Line 11 + line 12)	\$ 4,600.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 2,440.60
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ - 0 -
16	Loan Repayments Made (Please list on Schedule "C")	\$ - 0 -
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ - 0 -
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ - 0 -
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 2,440.60
20	Total Spending (Line 18 + line 19)	\$ 2,440.60

Schedule A – Itemized Contributions Statement (\$20 or more)

[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: TIM LONG for NORTHGLENN MAYOR CAMPAIGN COMMITTEE

WARNING: Please read the instruction page for Schedule “A” before completing!

PLEASE PRINT/TYPE

1. Date Accepted <u>08.17.2023</u>	4. Name (Last, First): <u>TIMOTHY L. LONG</u>
2. Contribution Amt. \$ <u>500.00</u>	5. Address: <u>10661 UTRILLO LANE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>NORTHGLENN, COLORADO 80234</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECKING ACCOUNT</u>
	8. Employer (if applicable, mandatory): <u>GRADALLS CONSULTING & SERVICES, LLC</u>
	9. Occupation (if applicable, mandatory): <u>FINANCE DIRECTOR</u>

1. Date Accepted <u>09.07.2023</u>	4. Name (Last, First): <u>FRANK F. ATWOOD</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>7094 S. COSTILLA ST</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>LITTLETON, COLORADO 80120</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK</u>
	8. Employer (if applicable, mandatory): <u>RETIRED</u>
	9. Occupation (if applicable, mandatory): <u>RETIRED</u>

1. Date Accepted <u>09.07.2023</u>	4. Name (Last, First): <u>TIMOTHY L. LONG</u>
2. Contribution Amt. \$ <u>1,100.00</u>	5. Address: <u>10661 UTRILLO LANE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>NORTHGLENN, COLORADO 80234</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK</u>
	8. Employer (if applicable, mandatory): <u>GRADALLS CONSULTING & SERVICES, LLC</u>
	9. Occupation (if applicable, mandatory): <u>FINANCE DIRECTOR</u>

1. Date Accepted <u>09.09.2023</u>	4. Name (Last, First): <u>TIMOTHY L. LONG</u>
2. Contribution Amt. \$ <u>1,300.00</u>	5. Address: <u>10661 UTRILLO LANE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>NORTHGLENN, COLORADO 80234</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK</u>
	8. Employer (if applicable, mandatory): <u>GRADALLS CONSULTING & SERVICES, LLC</u>
	9. Occupation (if applicable, mandatory): <u>FINANCE DIRECTOR</u>

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec. 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

Schedule A – Itemized Contributions Statement (\$20 or more)

[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: TIM LONG for NORTHGLENN MAYOR CAMPAIGN COMMITTEE

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. Date Accepted <u>10/11/2023</u>	4. Name (Last, First): <u>DENISE S. CLARKE & JAMES B. CLARKE</u>
2. Contribution Amt. \$ <u>500.00</u>	5. Address: <u>842 MURIEL DRIVE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>NORTHGLENN, COLORADO 80233</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK</u>
	8. Employer (if applicable, mandatory): <u>RETIRED</u>
	9. Occupation (if applicable, mandatory): <u>RETIRED</u>

1. Date Accepted <u>10/11/2023</u>	4. Name (Last, First): <u>BEATRICE M. KOCHMAN</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>10680 UTRILLO LANE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>NORTHGLENN, COLORADO 80234</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK</u>
	8. Employer (if applicable, mandatory): <u>RETIRED</u>
	9. Occupation (if applicable, mandatory): <u>RETIRED</u>

1. Date Accepted <u>10/11/2023</u>	4. Name (Last, First): <u>TIMOTHY L. LONG</u>
2. Contribution Amt. \$ <u>1,000.00</u>	5. Address: <u>10661 UTRILLO LANE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>NORTHGLENN, CO 80234</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK</u>
	8. Employer (if applicable, mandatory): <u>GRADALUS CONSULTING & SERVICES, LLC</u>
	9. Occupation (if applicable, mandatory): <u>FINANCE DIRECTOR</u>

1. Date Accepted	4. Name (Last, First):
2. Contribution Amt. \$	5. Address:
3. Aggregate Amt. * \$	6. City/State/Zip:
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec. 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

Schedule B – Itemized Expenditures Statement (\$20 or more)

[1-45-108(1)(a), C.R.S.]

Full Name of Committee/Person: TIM LONG FOR NORTHCROWN MAYOR CAMPAIGN COMMITTEE

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>09.07.2023</u>	4. Name: <u>UNDERWOOD, LLC</u>
2. <u>Amount</u> \$ <u>1,000.00</u>	5. Address: <u>1500 W. THORNTON PKWY LOT 228</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>THORNTON, CO 80260</u>
	7. Purpose of Expenditure: <u>GENERAL CONSULTING SERVICES</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>09.19.2023</u>	4. Name: <u>SIGNS ON THE CHEAP</u>
2. <u>Amount</u> \$ <u>440.60</u>	5. Address: <u>11525A STONEHOLLOW DRIVE - STE 100</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>AUSTIN, TEXAS 78758</u>
	7. Purpose of Expenditure: <u>YARD SIGNS - DOUBLE SIDED W/ WIRE STAKES</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10.12.2023</u>	4. Name: <u>UNDERWOOD, LLC</u>
2. <u>Amount</u> \$ <u>1,000.00</u>	5. Address: <u>1500 W. THORNTON PKWY LOT 228</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>THORNTON, CO 80260</u>
	7. Purpose of Expenditure: <u>GENERAL CONSULTING SERVICES</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u>	5. Address: _____
\$ _____	6. City/State/Zip: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	7. Purpose of Expenditure: _____
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u>	5. Address: _____
\$ _____	6. City/State/Zip: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	7. Purpose of Expenditure: _____
	<input type="checkbox"/> Check box if Electioneering Communication

Schedule C - Loans

Full Name of Committee/Person: TIM LONG for NORTHGLENN CAMPAIGN COMMITTEE

LOANS - Loans Owed by the Committee

(Use a separate schedule for each loan. This form is for line item 8 and 16 of the Detailed Summary Report.)

[No information copied from such reports shall be sold or used by any person for the purpose of soliciting contributions or for any commercial purpose. [Art. XXVIII, Sec. 9(e)] Notwithstanding any other section of this article to the contrary, a candidate's candidate committee may receive a loan from a financial institution organized under state or federal law if the loan bears the usual and customary interest rate, is made on a basis that assures repayment, is evidenced by a written instrument, and is subject to a due date or amortization schedule [Art. XXVIII, Sec. 3(8)]

LOAN SOURCE

Name (Last, First or Institution): _____

Address: _____

City/State/Zip: _____

Original Amount of Loan: \$ _____ Interest Rate: _____

Loan Amount Received This Reporting Period: \$ _____

Total of All Loans This Reporting
Period: \$ _____

(Place on line 8 of Detailed Summary Report)

Principal Amount Paid This Reporting Period: \$ _____

Interest Amount Paid This Reporting Period: \$ _____

Amount Repaid This Reporting Period: \$ _____

(Amount Repaid is sum of Principal & Interest entered on Detail Summary)

Total Repayments Made: \$ _____

(Sum of Schedule C pages, Place on line 16 of
Detailed Summary)

Outstanding Balance: \$ _____

TERMS OF LOAN:

_____ Date Loan Received

_____ Due Date for Final Payment

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, City, State, Zip	Amount Guaranteed

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: TIM LONG for NORTHACRENN MAYOR CAMPAIGN COMMITTEE

Returned Contributions

(Previously reported on Schedule A – Contributions accepted and then returned to donors)

PLEASE PRINT/TYPE

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Purpose: _____

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Purpose: _____

Returned Expenditures

(Previously reported on Schedule B – Expenditures returned or refunded to the committee)

PLEASE PRINT/TYPE

1. <u>Date Expended</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Comment (Optional): _____

1. <u>Date Expended</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Comment (Optional): _____

Statement of Non-Monetary Contributions
[Art. XXVIII, Sec. 2(5)(a)(II)(III) & Sec. 5(3) & 1-45-108(1), C.R.S.]

Full Name of Committee/Person: TIM LONG for NORTHGLENN MAYOR CAMPAIGN COMMITTEE

PLEASE PRINT/TYPE

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</u> \$	5. Address: _____
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</u> \$	5. Address: _____
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</u> \$	5. Address: _____
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

* Note: If coordinated, then contribution must also be reported as a non-monetary expenditure on Detailed Summary. Art. XXVIII, Sec. 2(9) states: "...Expenditures that are controlled by or coordinated with a candidate or candidate's agent are deemed to be both contributions by the maker of the expenditures, and expenditures by the candidate committee."