Colorado Secretary of State **Elections Division**

1700 Broadway, Ste. 200 Denver, CO 80290 Ph: (303) 894-2200 ext. 6383

(303) 869-4861 Fax: Email: cpfhclp@sos.state.co.us

www.sos.state.co.us



Space Below For Office Use Only

Roud 14 2023
He to

REPORT OF CONTRIBUTIONS AND EXPENDITURES

	(1-45-108, C.R.S.)	conre				
Full Name of Committee/Person:	Frank Freeman For C	reeley				
Address of Committee/Person:	As Shown On Registration					
City, State & Zip Code:	6600 West 20TH ST # 40					
-	(reeley, CO, 80634					
Committee Type:	City Council At-Large					
lame and Address of Financial ustitution	Canvas Credit Union, 3532 W 10TH ST, Greeley, CO 80634					
SOS ID NUMBER	(state and county committees):					
Type of Report						
Regularly Scheduled Filing	g.					
Amended Filing. This amend	•					
Termination Report. (Termi	nation Reports MUST Have a Monetary Balance	of Zero in Line 5)				
	rt Contains Electioneering Communication					
Reporting Period Covered:	11/4/2023 Thro	ugh 12/12/2023				
Reporting Period Covered:	Date	Date				
Declared Total Spending (if app [Art. XXVIII, Sec. 4(1)]	sicable) \$371,88					
		Totals Detailed Summary Page				
Funds on Hand at the Beginning	of Reporting Period (monetary only)	\$.371.88				
Total Monetary Contributions (li		\$ 0.00				
Total of Monetary Contributions	& Beginning Amount (line 1 + line 2)	\$ 371.88				
Total Monetary Expenditures (lin		\$ 371.88				
	porting Period (monetary) (line 3 – line 4)	\$ 0.00				
The appropriate officer s	hall impose a penalty of \$50 per day for ea [Art. XXVIII Sec. 10(2)(a)]	ich day that a report is filed late.				
penalty of perjury, that to the best of	by either the Registered Agent OR the Candidate) my knowledge or belief all contributions rece in the form of membership dues transferred b	eived during this reporting period,				
Print Registered Agent's Name: _						
Registered Agent's Signature:						
Print Candidate Name: Frank	Freeman					
Candidates Signature: Jran	K Freenjan	Date: 12/14/2023				
(/ (Colorado Secretary of State Form Rev. 12/0				

DETAILED SUMMARY

Full Name of Committee/Person: Frank Freeman For Greeley

Current Reporting Period: 11 4 2023 Through 12/12/2023

Funds on hand at the beginning of reporting period (Monetary Only)		\$ 371. ⁸⁸		
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 0.00		
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 0.00		
8	Loans Received (Please list on Schedule "C")	\$ 0.00		
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ 0.00		
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ 0.00		
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 371.88		
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 0.00		
13	Total Contributions (Line 11 + line 12)	\$ 371.88		
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 371.88		
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 0.00		
16	Loan Repayments Made (Please list on Schedule "C")	\$ 0.00		
17	Returned Contributions (To donor) (Please list on Schedule "D")	s 0.00		
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ 0.00		
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 371.88		
20	Total Spending (Line 18 + line 19)	\$ 371.88 \$ 371.88		

Full Name of Committe	ee/Person: Frank Freeman For Greeley				
PLEASE PRINT/TYPE 1. Date Expended 11 7 2023 2. Amount \$ 371.88 3.Recipient is (optional): Committee Non-Committee	4. Name: Olive Garden 5. Address: 2285 Greeley Mall 6. City/State/Zip: Greeley, CO 80631 7. Purpose of Expenditure: Campaign Dinner & Supplies Check box if Electioneering Communication				
1. Date Expended	4. Name:				
3.Recipient is (optional): ☐ Committee ☐ Non-Committee	5. Address: 6. City/State/Zip: 7. Purpose of Expenditure: Check box if Electioneering Communication				
1. Date Expended	4. Name:				
2. Amount \$ 3.Recipient is (optional): Committee Non-Committee	5. Address: 6. City/State/Zip: 7. Purpose of Expenditure: Check box if Electioneering Communication				
Date Expended Amount	4. Name:				
\$ 3.Recipient is (optional): Committee Non-Committee	5. Address: 6. City/State/Zip: 7. Purpose of Expenditure: Check box if Electioneering Communication				
1. Date Expended	4. Name:				
2. Amount \$ 3.Recipient is (optional): Committee Non-Committee	5. Address: 6. City/State/Zip: 7. Purpose of Expenditure: Check box if Electioneering Communication				

Colorado Secretary of State Form Rev. 12/09

Colorado Secretary of State Elections Division 1700 Broadway, Ste. 200

Denver, CO 80290

Ph:

(303) 894-2200 ext. 6383 (303) 869-4861

Fax: (303) 869-4861 Email: cpfhelp@sos.state.co.us www.sos.state.co.us

space Below For Office Use Only
*Note: I miscalculated my spending
on the first submittle.

This is con updated & corrected
version to alose out my
campaign account Reporting
- Frank Freeman

STATEMENT OF PERSONAL EXPENDITURES BY A CANDIDATE

[1-45-108(1) & 1-45-109, C.R.S.]

For use by a candidate who has not received any contributions (does not have a candidate committee), but has made expenditures of personal funds.

		expend	itures of p	bersonai iund	S.
Name of Candidate	: Frank 1	Freem	an		
Address of Candid	ate: (660 0	Wes	t 20T	H ST A	+40
Office: Greeley (ity Council A	t-Larg	₽ Distric	et No.:	Elec./Yr.: 2023
Reporting Period:	ate 11/4/2023			Zip Code: 80634 Elec./Yr.: 2023 Ending Date 12 12 2023	
Total amount of N					
Expenditures exce	eeding \$19.99 sh	all be ite	emized, a	nd listed be	elow.
Date Expended	Amount	Name of Recipient		cipient	Address
	\$				
Cit	у	State Zip			Comment / Purpose
Date Expended	Amount	Name of Recipient		cipient	Address
	\$				
City		State	Zip	ip Comment / Purpose	
Date Expended	Amount	Name of Recipient		cipient	Address
	\$				
City		State	State Zip Comment / Purpose		Comment / Purpose
I certify to the best	of my knowledg	e this St	atement c	of Expenditu	ures is true and correct.

Candidate Signature: Trank Treeman Date

Colorado Secretary of State Rev. 12/09