

Colorado Secretary of State
Elections Division
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Denver, CO 80290
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Space Below For Office Use Only

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

Full Name of Committee/Person: Citizens for Responsible Government *William Schmitt*
As Shown On Registration

Address of Committee/Person: P.O. Box 2357
City, State & Zip Code: Vail, CO, 81658

Committee Type: PAC

Name and Address of Financial Institution: 17 Vail Road

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: 10/2020 ~~10/12/21~~ **Through** 10/17/21 ~~10/12/21~~
Date Date

Declared Total Spending (if applicable) [Art. XXVIII, Sec. 4(1)] \$ 162

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 0
2	Total Monetary Contributions (line 11)	\$ 162
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 162
4	Total Monetary Expenditures (line 19)	\$ 0
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 162

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: William E. Schmitt IV

Registered Agent's Signature: *William E. Schmitt IV* Date: 10/12/21

Print Candidate Name: _____

Candidates Signature: _____ Date: _____

- Line #3 – Enter the sum of Lines #1 and #2.
- Line #4 – Enter the total amount from Line #19.
- Line #5 – Enter the difference of Line #3 minus Line #4.

STEP 5. Complete the Authorization portion of the Report of Contributions and Expenditures form by printing the name of the registered agent and then sign and date the report.

Schedule A Instructions

NOTE: In addition to the reporting requirements of 1-45-108, C.R.S., please note provisions for specific Committee type, as follows:

Candidate, Issue, Political Party and Political Committee (PC)

- Required to disclose occupation **and** employer for all \$100 or more contributions made by natural persons. (Art. XXVIII, Sec. 7)

Small Donor Committee

- Accepts contributions of no more than \$50 per year, FROM NATURAL PERSONS ONLY. [Art. XXVIII, Sec. 2(14)(a)]

Electioneering Communications Reporting

- Reporting required by persons spending \$1,000 or more on Electioneering Communications,
- Required to disclose occupation **and** employer for all \$250 or more contributions made by natural persons. (Art. XXVIII, Sec. 6)
- Corporate and Labor Organization funding are prohibited. (Art. XXVIII, Sec. 6)

Contribution Limits – State Candidates

(Art. XXVIII, Sec. 3)

Candidates:

- **\$525** ♦ Primary, **\$525** ♦ General if nominated to general election ballot – Gov*, Gov/Lt. Gov**, Secretary of State, Attorney General and State Treasurer
- **\$200** Primary, **\$200** General if nominated to general election ballot – State Senate, State House of Representative, State Board of Education, CU Regent, and District Attorney.

Note: Candidates may receive the primary and general election contributions at one time, the contributor must note that the contribution is for both the primary and general election contribution. Candidates must note both contributions on their report. It is preferred that each contribution be given separately; one check written for the primary and one check written for the general, and so noted by the contributor on the check and by the recipient on the report.

Political Committees (State, County, District & Local):

- **\$525** ♦ per House of Representatives Election Cycle

Political Party (From any person other than Small Donor):

- **\$ 3,175** ♦ per year no more than **\$2,650** ♦ to state party.

Political Party (From Small Donor):

- **\$15,900** ♦ per year no more than **\$13,250** ♦ to state party.

Prohibitions on next page. Please refer to Article XXVIII, Section 3 of the Colorado Constitution for complete contribution limits and prohibited contributions.

* Primary Election

** General Election

♦ Contribution Limits reflect adjustments made by CPF Rule 12 pursuant to Article XXVIII, Sec. 3(13) of the Colorado Constitution.

PROHIBITED CONTRIBUTIONS

[Art. XXVIII, Sec.3 & C.R.S. 1-45-105.5]

- No candidate's candidate committee shall accept contributions from, or make contributions to, another candidate committee.
- No person shall act as a conduit for a contribution to a candidate committee.
- It shall be unlawful for a corporation or labor organization to make contributions to a candidate committee or a political party, and to make expenditures expressly advocating the election or defeat of a candidate; except that a corporation or labor organization may establish a political committee or small donor committee which may accept contributions or dues from employees, officeholders, shareholders, or members.
- No candidate committee, political committee, small donor committee, or political party shall knowingly accept contributions from:
 - Any natural person who is not a citizen of the United States;
 - A foreign government; or
 - any foreign corporation that does not have the authority to transact business in this state pursuant to article 115 of title 7, C.R.S., or any successor section.
- No candidate committee, political committee, small donor committee, issue committee, or political party shall accept a contribution, or make an expenditure, in currency or coin exceeding one hundred dollars.
- No person shall make a contribution to a candidate committee, issue committee, political committee, small donor committee, or political party with the expectation that some or all of the amounts of such contribution will be reimbursed by another person. No person shall be reimbursed for a contribution made to any candidate committee, issue committee, political committee, small donor committee, or political party, nor shall any person make such reimbursement except as provided in subsection (8) of this section. [Art. XXVIII, Sec. 3(8)]
- Contributions from professional and volunteer lobbyists to any member of or candidate for the general assembly, or the governor or candidate for governor are prohibited during regular legislative session.
- Political Committees may contribute to a legislator during session, unless the political committee employs, retains, engages, or uses, with or without compensation, a professional or volunteer lobbyist.

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

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

Full Name of Committee/Person: Citizens For Responsible Govt.

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>10/6/21</u>	4. Name (Last, First): <u>William Schmick</u>
2. <u>Contribution Amt.</u> \$ <u>1.00</u>	5. Address: <u>PO Box 2357</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Vail CO 81657</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Open Bank account</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>N/A</u>

1. <u>Date Accepted</u> <u>10/4/21</u>	4. Name (Last, First): <u>William Schmick</u>
2. <u>Contribution Amt.</u> \$ <u>161.00</u>	5. Address: <u>PO Box 2357</u>
3. <u>Aggregate Amt. *</u> \$ <u>162.00</u>	6. City/State/Zip: <u>Vail CO 81657</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Open postc of Box</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>NA</u>

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</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>): _____

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</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>): _____

* 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: _____

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 10/6/21	4. Name: <u>First Bank Vail Branch</u>
2. <u>Amount</u> \$ <u>100</u>	5. Address: <u>17 Vail Rd</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Vail CO</u>
	7. Purpose of Expenditure: <u>open bank account</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/4/21	4. Name: <u>United States Post Office</u>
2. <u>Amount</u> \$ <u>141.00</u>	5. Address: <u>300 N. Frontage Rd</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Vail CO 81657</u>
	7. Purpose of Expenditure: <u>open post office Box</u>
	<input type="checkbox"/> Check box if Electioneering Communication

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

Schedule C - Loans

Full Name of Committee/Person: _____

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: _____

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: _____

PLEASE PRINT/TYPE

1. <u>Date Provided</u>	4. Name (Last, First): <u>D/A</u>
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."



VAIL
 1300 N FRONTAGE RD W
 VAIL, CO 81657-9998
 (800)275 8777

10-04-2021 11:32 AM

Product	Qty	Unit Price	Price
6 MO Box			\$161.00
Box / ZIP Code: 81658			
Box Number: 2357			
Box Size, Size 3 - 11 in x 5.5 in			
Rental Period: Semi Annual			
Rental Start Date: 10/04/2021			
Next Renewal Date: 03/31/2022			
Key Fee			\$0.00
Keys Delivered: 2			
Key Deposit			\$0.00
Key Count: 2			
Key Number: 22749			
Total			\$161.00
Grand Total:			\$161.00

Credit Card Remitted \$161.00
 Card Name: VISA
 Account #: XXXXXXXXXXXXXXX0821
 Approval #: 00013D
 Transaction #: 278
 AID: A0000000031010
 AL: VISA CREDIT
 PIN: Not Required
 CHASE VISA

+ \$1 for bank account chip

FirstBank
 Vail Branch
 www.efirstbank.com
 Customer Service 1-800-964-3444

10/06/21 11:10 AM

Deposit Slip

Amount: \$1.00
 Account Number: XXXXXX4028
 Posting Date: 10/06/21
 Teller: 1 Seq: 0059

Deposits may not be available for immediate withdrawal. Checks and other items received for deposit are accepted subject to verification and subject to the terms and conditions of FirstBank's deposit agreement.

 USPS is experiencing unprecedented volume increases and limited employee availability due to the impacts of COVID-19. We appreciate your patience.

Preview your Mail
 Track your Packages
 Sign up for FREE @
<https://inform.edelivery.usps.com>

Earn rewards on your business account purchases of Priority Mail labels with the USPS Loyalty program by using Click and Ship. Visit www.usps.com/smaltbizloyalty for more info.

United States Postal Service
 NOW HIRING NATIONWIDE

DETAILED SUMMARY

Full Name of Committee/Person: _____

Current Reporting Period: Through

Funds on hand at the beginning of reporting period (Monetary Only)		\$
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 162 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")	\$ 162 ⁰⁰
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 0
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 0
13	Total Contributions (Line 11 + line 12)	\$ 162 ⁰⁰
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 162 ⁰⁰
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)	\$ 162 ⁰⁰
20	Total Spending (Line 18 + line 19)	\$ 162. ⁰⁰