Colorado Secretary of State Elections Division 1700 Broadway, Ste. 200 Denver, CO 80290

(303) 894-2200 ext. 6383 (303) 869-4861 Ph: Fax: cpfhelp@sos.state.co.us

Email: www.sos.state.co.us



STATEMENT OF PERSONAL EXPENDITURES BY A CANDIDATE

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

For use by a candidat	e who has not re			ons (does not personal fund	have a candidate committee), but has made s.	
Name of Candidate: LEVIN R. FOLEY						
Address of Candidat	te: 2111	N. FR	ONTAG	-E PD.	N. #28	
City: VAIL State: COLOPAT						
Office: TOWN COUNCIL District No.				et No.:	Elec./Yr.:	
Reporting Period: Beginning Date Oct. U, 2019 Ending Date Oct. 27, 20						
Total amount of Non-Itemized Expenditures (\$19.99 or less): \$ # 3.25						
Expenditures exceeding \$19.99 shall be itemized and listed below.						
Date Expended	Amount	Name of Recipient			Address	
	\$					
City		State	Zip		Comment / Purpose	
Date Expended	Amount	Name of Recipient		ecipient	Address	
\$ City		State Zip			Comment / Purpose	
					·	
Date Expended	Amount	Name of Recipient		ecipient	Address	
	\$					
City		State Zip			Comment / Purpose	
I certify to the best	of my knowled	ge this St	atement of	of Expenditu	ures is true and correct.	
Candidate Signature	: <u>K</u> ~	R Fary	X-		Date: Nov. 1, 2019	
			U		Colorado Secretary of State Rev. 12/09	