

Office of the City Clerk

500 East Third Street, Suite 230 • Loveland, Colorado 80537 (970) 962-2322 • FAX (970) 962-2901 • TDD (970) 962-2620 www.cityofloveland.org

Campaign Finance Independent Expenditures

(Lovela	nd City Charter Section 17-9)
Full Name of Person:	Shent Majority Speaks
Contact Phone Number:	970 397 4567
Name of Candidate/Issue:	Recall Tray Krenning Support
Physical Address:	1540 Main Street, Ste 210. Windsor
	00,80580
Employer:	
Address:	
Date obligated (form filed within 3 days):	07.81.3024
Amount of funds obligated:	3875.00
Datailed Description of Francisches	10
Name of Vendor providing services, property	nuassing
	paign Creative
Address of Vendor: PO Boy 51935	payn Geame
Los Angeles, CA	annsi
	-,000
Any person who knowingly violates or fails	to comply with any of the provision or Article 17 of the
	or and is subject to a fine or imprisonment in accordance
with ordinances adopted by the City Council pursuant to LCC 4-14.	
Authorization (Must be completed by Person n	naking Independent Expenditure):
I hereby certify and declare that to the best of my knowledge and belief that this is a true and correct	
	oneous or incomplete information may be subject to
sanctions in accordance with the City of Loveland Charter Article 17.	
1 1 2 -	
Printed Name: Hmber Celul	Title: Hgent
(And Maa 1	1 1 1
Signature: WWW.	Date: 7 88 84
Form revise d 2/20 21	.