

Return to:  
Tiffany O'Connell, Town Clerk  
Town of Mt. Crested Butte  
PO Box 5800  
911 Gothic Road  
Mt. Crested Butte, CO 81224  
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970-349-6632, ext 103



## PERSONAL FINANCIAL DISCLOSURE STATEMENT

*File in accordance with the appropriate statutes.*

1-45-110(2)(a), 24-6-202, 24-21-603(2)(h), 24-51-207(4), 44-30-301(1)(g), 44-32-301(1)(g), 44-40-108(6), C.R.S.

Personal financial disclosure statements (PFD) filed for ballot access purposes must be filed within 10 days of filing a candidate affidavit unless the candidate is an incumbent and has timely filed their annual PFD or Updated statement in accordance with 24-6-202(4), C.R.S.

Judges running for retention and judges appointed to a court of record are only required to file their PFD on or before the January 10 following such retention, appointment, or election.

**This statement is a public document and will be available as requested b.** You **MUST** fill out this form accurately, completely, and file it timely. Failure to do so may result in one or more of the following sanctions:

- A \$50 per day late filing penalty that will accrue until the statement is filed (Art. XXVIII, Sec. 10(2)(a), Colorado Constitution and 1-45-110, C.R.S.),
- An administrative complaint that may result in civil penalties, or
- Criminal sanctions as outlined in 24-6-202(7), C.R.S.

***Law enforcement offices (Attorney General, District Attorney, Judge, etc.): Should NOT list their personal contact information such as home address, phone, or email on this form. These offices may provide alternative contact information (P.O. Box, business address and phone number, or general email address).***

**Attach extra pages, as necessary.**

<b>Name:</b>	
<b>Mailing Address:</b> (Include city, state, and zip):	
<b>Office Held / Sought:</b>	
<b>Business Phone:</b>	
<b>Residence/Cell Phone:</b>	

<b>Name:</b>	
<b>Office Held /Sought:</b>	

**Select the appropriate categories:**

**I am filing this disclosure because:**

- I am filling a vacancy.   
 I am seeking election to office   
 This is my annual filing.

**I am filing as:**

- Office Holder/Incumbent: \_\_\_\_\_  
(OFFICE/DISTRICT NUMBER)
- Candidate: \_\_\_\_\_  
(OFFICE/DISTRICT NUMBER)
- State Board/Agency/Commission/Member: \_\_\_\_\_  
(OFFICE)
- Judge: \_\_\_\_\_  
(SUPREME COURT; COURT OF APPEALS; COUNTY or JUDICIAL DISTRICT,  
SENIOR JUDGE, and MAGISTRATE)
- Other: \_\_\_\_\_  
(Office)

**INCOME:**

List the names of any sources of income, including capital gains (whether or not taxable) for yourself, your spouse, and minor children residing with you.

<b>Recipient of Income</b> (Individual receiving income, e.g., Self, Spouse, Minor Child(ren) #1, #2, etc.)	<b>Source of Income</b> (Name of Employer)	<b>Range Amount</b> (E.g., Between \$30,000 and \$67,000)

<b>Name:</b>	
<b>Office Held /Sought:</b>	

**Sources of Compensation:**

List sources of compensation exceeding \$5,000 received by you or your business affiliation for services provided directly by you during the current year and during the prior calendar year, if the source is a person or entity that is regulated by the state or pays for a lobbyist that conducts lobbying at the General Assembly or at a State Regulatory body. This includes Clients and Customers of any affiliated corporation, firm, partnership, or other business enterprise and a description of the duties performed or services rendered for each source of compensation if you directly provided the services generating a fee or payment. You may exclude any information considered confidential because of a privileged relationship recognized by law. If you withhold information because of a privileged relationship, you must disclose the existence of the source of compensation and an explanation for why information was withheld.

<b>Recipient of Compensation</b> (Self or business affiliation)	<b>Compensation Source</b> (E.g., Clients, customers, affiliated corporation, firm, partnership, or other business enterprise)	<b>Description of Duties / Services Rendered</b>	<b>Explanation for withheld information</b> (for Confidential or Privileged Relationships)

**Compensated Lobbying:**

List the name of any person, firm, or organization for whom compensated lobbying is done by any person associated with you if the benefits of such compensation are or may be shared by you directly or indirectly.

<b>Name of Person, Firm, Corporation, or Organization Retaining Lobbyist</b>

**ASSETS:**

List the name of each business, insurance policy, or trust where there is a financial interest in excess of \$5,000 for yourself, your spouse, and minor children residing with you.

<b>Who is the person with the financial interest?</b> [E.g., Self, Spouse, Minor Child(ren)]	<b>Name of Business, Insurance Company, or Trust</b>

<b>Name:</b>	
<b>Office Held /Sought:</b>	

**Property in Colorado:**

List the LEGAL description (as shown on the books of the county assessor) of all real property in Colorado (including an option to buy) in which you, your spouse, and minor children residing with you have a direct or indirect interest with a fair market value in excess of \$5,000. Property that must be listed includes residential, investment property, condominium, rental property and any mineral, water, coal, and rights to sand and gravel. STREET ADDRESSES DO NOT SATISFY STATUTORY REQUIREMENTS.

<b>Owner of Record</b>	<b>Legal Description of Property</b>

**Offices, Directorships, and Fiduciary Relationships:**

List all offices, directorships, and fiduciary relationships held by you, your spouse, and any minor children residing with you and include whether the position is compensated or uncompensated.

<b>Person Holding Position</b>	<b>Position Held</b>	<b>Name of Organization or Trust</b>	<b>Compensation</b> (E.g., \$500; \$1,000; \$5,000)

**Businesses Regulated by the State of Colorado:**

List any businesses which you or your spouse are associated with that do business with or are regulated by the state and the nature of such business (e.g., attorney, insurance, medical profession, real estate, securities, etc.).

<b>Person Involved</b> (Self or spouse)	<b>Name of Business</b>	<b>Nature of Business</b>

<b>Name:</b>	
<b>Office Held /Sought:</b>	

**Liabilities:**

List the name of each creditor for yourself, your spouse, and minor children living with you to whom debt is owed in excess of \$1,000. Include the interest rate and the range of amounts owed including the highest owed amount.

<b>Person Liable for Debt</b> (E.g., Self, Spouse, Minor Child(ren) #1, #2, etc.)	<b>Name of Creditor</b>	<b>Interest Rate (%)</b>	<b>Debt Amount Range Owed</b> (E.g., Between \$1,000 and \$5,000)

**Additional Information:**

List below any additional information you would like to disclose. Attach extra pages, as necessary.


**Filing of Tax Returns:**

Any person subject to the provision of 24-6-202, C.R.S. may elect to file copies of federal income tax return(s) along with a certified statement of any investments held by you, your spouse, and minor children residing with you which are not reflected by the income tax return(s) in lieu of complying with the provisions of subsections (1) to (4) of 24-6-202, C.R.S. *Submitted tax returns and statements are public information. Any information required on this form that is NOT included in a federal income tax return must be added to this form.*

**Note:** Within 30-days after any termination or acquisition of interests you must file an amended Personal Financial Disclosure (PFD) statement. You may resubmit this form or use the *Personal Financial Disclosure Statement-Update* form.

**Affirmation:**

*I affirm and certify, under penalty of perjury, that the information provided in this disclosure statement is true, complete, and correct to the best of my knowledge and belief.*

\_\_\_\_\_  
Print name of candidate/incumbent/filer

\_\_\_\_\_  
Signature of candidate/incumbent/filer

Date: \_\_\_\_\_