

# Contributions & Expenditures Report

(PLEASE COMPLETE **REQUIRED** SECTIONS)

FILING OFFICE: COUNTY CLERK  
Office Use Only

LARAMIE COUNTY CLERK  
CHEYENNE, WY

2020 AUG -5 P 3:24

## 1. Reporting Period:

Statement covers period of 5/15/2020 to 8/11/2020  
(mm/dd/yyyy) (mm/dd/yyyy)

## 2. Type of Report (Please select one option.):

- Primary Contributions & Expenditures: **Aug 11, 2020**  Special Election  
 General Contributions & Expenditures: **Oct 27, 2020**  Amendment  
 Contributions & Expenditures: **Dec 31, \_\_\_\_\_ (odd-year)**

## 3. Are you terminating the committee with this report?

(Note: A committee must have retired all debts before terminating. WS 22-25-106(b)(iii))

Yes  No

## 4. Candidate or Committee Information:

Name: Dr. Michelle Aldrich Office Sought: City Council Ward #3  
Residential Address: 4505 E. 17 St Phone Number: 307-760-6213  
(Street Address)  
Cheyenne WY 82001  
(City, State, Zip)

## 5. Contributions:

Did you have contributions or expenditures to report for this filing period?  Yes  No

If yes, please complete A-C below.

### A. Contributions

- |   |                   |
|---|-------------------|
| 1. Personal contributions by candidate (including immediate family) (p 2) | \$ <u>1807.71</u> |
| 2. Contributions from individuals (p 3)                                   | \$ _____          |
| 3. Contributions from PACs (p 4)  | \$ _____          |
| 4. Contributions from political parties (p 4)                             | \$ _____          |
| 5. Anonymous contributions (p 5)  | \$ _____          |
| 6. In-kind contributions (p 5)  | \$ _____          |
| 7. Loans (p 6)  | \$ _____          |
| 8. Un-itemized contributions – defined as less than \$100 (p 6)           | \$ _____          |

B. Total Contributions for this Filing Period (sum of A1-A8) \$ 1807.71

C. Total Expenditures for this Filing Period (p 7) \$ 1807.71

## 6. Signature:

I certify that I have examined this statement and, to the best of my knowledge and belief, it is true, correct and complete.

<u>Dr. Michelle Aldrich</u> Committee Chairman Signature	_____ Committee Treasurer Signature	_____ Candidate Signature
<u>8/14/2020</u> Date	_____ Date	_____ Date

# Itemization of Contributions

(Use Additional Sheets as Necessary)

## Contributions – Personal Contributions by Candidate

(Including candidate's immediate family)

Name	Address (City, State, Zip)	Date	Amount
Dr. Michelle Aldrich	4505 E. 17 St	8/4/2020	\$ 1807.71
(Self)	Cheyenne WY 82001		\$
			\$
			\$
			\$
			\$
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			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

## Expenditures/Obligations

Payee	Address (City, State, Zip)	Purpose	Date	Amount
City of Cheyenne	2101 O'Neill Ave Cheyenne WY 82001	Filing Fee	5/15/2020	\$ 25.00
				\$
Build-A-Sign	11525 A Stonchollow Dr <sup>#100</sup> Austin TX 78758	Magnetic Signs	6/20/2020	\$ 36.93
				\$
Vista Print	Hudsonweg @ Venio Netherlands 5928 LW	Postcards / Business Cards	6/21/2020	\$ 313.09
				\$
US Postoffice	4800 Converse Ave Cheyenne WY 82002	Postage	7/2/2020	\$ 1400.00
				\$
Trophy Creative	1620 Thoner Ave Cheyenne WY 82001	Stamp	7/2/2020	\$ 30.67
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$

Total Expenditures: \$ 1807.71