



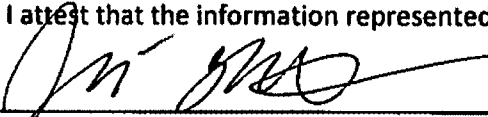
# Denver City Council Donations Made Report Calendar Year 2016

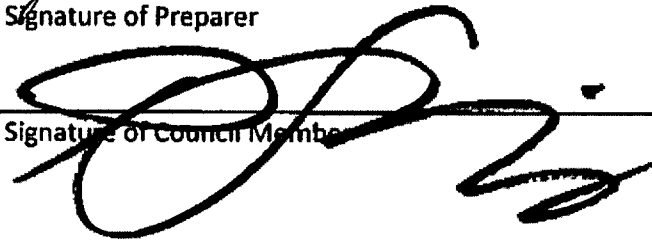
In compliance with Council Rule 11(e), this form is used to report donations made to entities during the previous calendar year. If no donations were made, please indicate "none" and sign and date the form. This form is due to the Central Council Office on January 31, 2017.

Council District : \_\_\_\_\_ 3 Council Member Name: López

| Date of Donation | Amount of Donation | Donation Made To     | Additional Information           |
|------------------|--------------------|----------------------|----------------------------------|
| 3/9/2016         | 250.00             | Café Cultura         | Café Cultura Event in District 3 |
| 3/29/2016        | 300.00             | Servicios De La Raza | Annual Las Raices Gala           |
| 7/12/2016        | 90.00              | WalkDenver           | I Walk Denver Gala               |
| 8/30/2016        | 1,000.00           | Denver Health        | Wall tile for Peña Clinic        |
|                  |                    |                      |                                  |
|                  |                    |                      |                                  |

I attest that the information represented herein is true, correct, and complete, to the best of my knowledge.

 \_\_\_\_\_  
Signature of Preparer Date 1/23/2017

 \_\_\_\_\_  
Signature of Council Member Date 1/23/2017

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 CITY & COUNTY OF DENVER  
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# Denver City Council Donations Received Report Calendar Year 2016

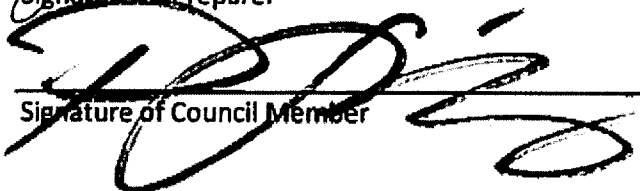
In compliance with Council Rule 11(e), this form is used to report donations received during the previous calendar year. If no donations were received, please indicate "none," and sign and date the form. This form is due to the Central Council Office on January 31, 2017.

Council District : \_\_\_\_\_ 3 Council Member Name: Paul López

| Date of Donation | Amount of Donation | Donor | Additional Information |
|------------------|--------------------|-------|------------------------|
|                  |                    | None  |                        |
|                  |                    |       |                        |
|                  |                    |       |                        |
|                  |                    |       |                        |
|                  |                    |       |                        |

I attest that the information represented herein is true, correct, and complete, to the best of my knowledge.

  
 Signature of Preparer \_\_\_\_\_ Date 1/23/2017

  
 Signature of Council Member \_\_\_\_\_ Date 1/23/2017

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