STATE OF COLORADO
1876

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REPORT OF CONTRIBUTIONS AND EXPENDITURES
(1-45-108, C.R.S.)

Full Name of Committee/Person:	McNally for Mayor
	As Shown On Registration
Address of Committee/Person:	███████████████
City, State & Zip Code:	███████████████
Committee Type:	Candidate
Name and Address of Financial Institution	Bellco 8851 N Harlan St, Westminster, Co 80021

SOS ID NUMBER (state and county committees): _____

Type of Report

☒ Regularly Scheduled Filing.

☐ Amended Filing. This amends previous report filed on (date) _____
   Submit changes or new information ONLY

☒ Termination Report. (Termination Reports MUST Have a Monetary Balance of Zero in Line 5)

☐ Check this box if this Report Contains Electioneering Communications Information

Reporting Period Covered: 10-28-2023 (Date) **Through** 10-27-2024 (Date)

Declared Total Spending (if applicable) $ _____
[Art. XXVIII, Sec. 4(1)]

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	$ 69.00
2	Total Monetary Contributions (line 11)	$ .53
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	$ 69.53
4	Total Monetary Expenditures (line 19)	$ 69.53
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 – line 4)	$ 0

The appropriate officer shall impose a penalty of $50 per day for each day that a report is filed late.
[Art. XXVIII Sec. 10(2)(a)]

Authorization (Must be completed by either the Registered Agent **OR** the Candidate): *I hereby certify and declare, under penalty of perjury, that to the best of my knowledge or belief all contributions received during this reporting period, including any contributions received in the form of membership dues transferred by a membership organization, are from permissible sources.*

Print Registered Agent's Name: Deborah M Tatar (AKA) Dubhie Tatar

Registered Agent's Signature: Deborah M Tatar   Date: 10/30/2024

Print Candidate Name: Nancy McNally

Candidates Signature: Nancy McNally   Date: 10/30/2024

Colorado Secretary of State Form Rev. 12/09

Schedule B – Itemized Expenditures Statement ($20 or more)
[1-45-108(1)(a), C.R.S.]

Full Name of Committee/Person: _____

PLEASE PRINT/TYPE

1. Date Expended 10/30/2024	4. Name: Westminster Historical Society - 501-C-3
2. Amount $ 69.53	5. Address: 4350 W 76 Ave
	6. City/State/Zip: Westminster, Co 80030
3. Recipient is (optional): ☐ Committee ☒ Non-Committee	7. Purpose of Expenditure: Zero out my account & gave to 501c-3 ☐ Check box if Electioneering Communication

1. Date Expended	4. Name: _____
2. Amount $	5. Address: _____
	6. City/State/Zip: _____
3. Recipient is (optional): ☐ Committee ☐ Non-Committee	7. Purpose of Expenditure: _____ ☐ Check box if Electioneering Communication

1. Date Expended	4. Name: _____
2. Amount $	5. Address: _____
	6. City/State/Zip: _____
3. Recipient is (optional): ☐ Committee ☐ Non-Committee	7. Purpose of Expenditure: _____ ☐ Check box if Electioneering Communication

1. Date Expended	4. Name: _____
2. Amount $	5. Address: _____
	6. City/State/Zip: _____
3. Recipient is (optional): ☐ Committee ☐ Non-Committee	7. Purpose of Expenditure: _____ ☐ Check box if Electioneering Communication

1. Date Expended	4. Name: _____
2. Amount $	5. Address: _____
	6. City/State/Zip: _____
3. Recipient is (optional): ☐ Committee ☐ Non-Committee	7. Purpose of Expenditure: _____ ☐ Check box if Electioneering Communication