



## REPORT OF COMPENSATION

Date	Location	Nature of Activity	Name of Payor	Amount

I hereby certify that this is a complete report of compensation received and is filed pursuant to Rules 3.12 and 3.15 of the Code of Judicial Conduct.

Forms required by sections 24-6-202 and 203, C.R.S., are on file with the Colorado Secretary of State.

Signature: \_\_\_\_\_

Judge: \_\_\_\_\_

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