



Report of Contributions and Expenditures (1-45-108, C.R.S.)

General Information

Full Name of Committee/Person *

Yes on 3A

Committee/Person Address ***Committee Type ***

Issue Committee

Financial Institution Address

Street Address

First Bank

Address Line 2

101 County Line Road

City

Littleton

Postal / Zip Code

80120

State / Province / Region

CO

Country

USA

Type of Report *

- ☒ Regularly Scheduled Filing
- ☐ Amended Filing
- ☐ Termination Report
- ☐ Report Contains Electioneering Communications Information

Reporting Period

	From *	Through *
Covered	Start Date mm/dd/yyyy 08/26/2025	End Date mm/dd/yyyy 09/16/2025

Funds on Hand at the Beginning of Reporting Period *

(monetary only)

\$ 0.00

Declared Total Spending

[Art. XXVIII, Sec. 4(1)]

\$ 7,164 05

Non-Itemized Contributions *

(Contributions of \$19.99 or Less)

\$ 73.00

Total of Other Receipts *

(Interest, Dividends, etc.)

\$ 0.00

Non-Itemized Expenditures *

(Expenditures of \$19.99 or Less)

\$ 18.32

Schedule A

Full Name of Committee/Person

Yes on 3A

Itemized Contributions Statement (\$20 or more)

[1-45-108(1)(a), C.R.S.]

Date Accepted *

08/25/2025

Contribution Amt. *

\$ 25.00

Aggregate Amt. *

\$ 25.00

Electioneering Communication *

☐ Yes

☒ No

Contributor Name *

(Last, First)

Quinn, Elaine

Contributor Address *



Contribution Description *

Donation

Contributor Employer

(if applicable, mandatory)

N/A - Contribution < \$100

Contributor Occupation

(if applicable, mandatory)

N/A - Contribution < \$100

Date Accepted *

08/25/2025

Contribution Amt. *

\$ 100.00

Aggregate Amt. *

\$ 100.00

Electioneering Communication *

☐ Yes

☒ No

Contributor Name *

(Last, First)

Lobban, Joanie

Contributor Address ***Contribution Description ***

Donation

Contributor Employer

(if applicable, mandatory)

aMentum

Contributor Occupation

(if applicable, mandatory)

Designer

Date Accepted *

09/15/2025

Contribution Amt. *

\$ 50.00

Aggregate Amt. *

\$ 50.00

Electioneering Communication *

☐ Yes

☒ No

Contributor Name *

(Last, First)

Ensz, M A

Contributor Address ***Contribution Description ***

Donation

Contributor Employer

(if applicable, mandatory)

N/A - Amount < \$100

Contributor Occupation

(if applicable, mandatory)

N/A Amount \$100

Date Accepted *

08/25/2025

Contribution Amt. *

\$ 25.00

Aggregate Amt. *

\$ 25.00

Electioneering Communication *

☐ Yes

☒ No

Contributor Name *

(Last, First)

McCain, Patrick

Contributor Address *

Contribution Description *

Donation

Contributor Employer

(if applicable, mandatory)

N/A - Amount < \$100

Contributor Occupation

(if applicable, mandatory)

N/A - Amount < \$100

Date Accepted *

08/25/2025

Contribution Amt. *

\$ 25.00

Aggregate Amt. *

\$ 25.00

Electioneering Communication *

☐ Yes

☒ No

Contributor Name *

(Last, First)

McClure, Paula

Contributor Address *

Contribution Description *

Donation

Contributor Employer

(if applicable, mandatory)

N/A - Amount < \$100

Contributor Occupation

(if applicable, mandatory)

N/A - Amount < \$100

Date Accepted *

07/14/2025

Contribution Amt. *

\$ 15,000.00

Aggregate Amt. *

\$ 15,000.00

Electioneering Communication *

☐ Yes

☒ No

Contributor Name *

(Last, First)

Rooted in Littleton

Contributor Address *



Contribution Description *

Donation

Contributor Employer

(if applicable, mandatory)

N/A

Contributor Occupation

(if applicable, mandatory)

N/A

Schedule B

Full Name of Committee/Person

Yes on 3A

Itemized Expenditures Statement (\$20 or more)

[1-45-108(1)(a), C.R.S.]

Date Expended *

08/08/2025

Expenditure Amt *

\$ 500.00

Recipient is (optional)

- ☐ Committee
☒ Non-Committee

Electioneering Communication *

- ☐ Yes
☒ No

Expenditure Name *

Erica Jagger

Expenditure Address *

Purpose of Expenditure *

PR / Social Media

Date Expended *

09/17/2025

Expenditure Amt *

\$ 1,923.32

Recipient is (optional)

- ☐ Committee
☒ Non-Committee

Electioneering Communication *

- ☐ Yes
☒ No

Expenditure Name *

Grande Station

Expenditure Address *

Street Address

2299 W Main Street

Address Line 2

City

Littleton

Postal / Zip Code

80120

State / Province / Region

CO

Country

USA

Purpose of Expenditure *

Fundraiser

Date Expended *

09/16/2025

Expenditure Amt *

\$ 600.00

Recipient is (optional)

- ☐ Committee
☒ Non-Committee

Electioneering Communication *

- ☐ Yes
☒ No

Expenditure Name *

RG Design

Expenditure Address *

Street Address

26 West Dry Creek

Address Line 2

Suite 600

City

Littleton

Postal / Zip Code

80120

State / Province / Region

CO

Country

USA

Purpose of Expenditure *

Web Design

Date Expended *

09/17/2025

Expenditure Amt *

\$ 957.06

Recipient is (optional)

- ☒ Committee
☐ Non-Committee

Electioneering Communication *

- ☐ Yes
☒ No

Expenditure Name *

Jane Brennan

Expenditure Address ***Purpose of Expenditure ***

Reimbursement for Flyers

Date Expended *

09/19/2025

Expenditure Amt *

\$ 3,165.35

Recipient is (optional)

- ☐ Committee
☒ Non Committee

Electioneering Communication *

- ☐ Yes
☒ No

Expenditure Name *

Horizon Reprographics

Expenditure Address *

Street Address

1030 W Ellsworth Ave

Address Line 2

Unit G

City

Denver

State / Province / Region

CO

Postal / Zip Code

80223

Country

USA

Purpose of Expenditure *

Flyers

Schedule C

Full Name of Committee/Person

Yes on 3A

Loans

Lender Name

(Last, First or Institution)

Lender Address

Street Address

Address Line 2

City

State / Province / Region

Postal / Zip Code

Country

Original Amount of Loan

Interest Rate

\$

Loan Amount Received

Principal Amount Paid

This Reporting Period

This Reporting Period

\$

\$

Interest Amount Paid

Total Repayments Made

This Reporting Period

\$

\$

Outstanding Balance

Date Loan Received

\$

mm/dd/yyyy

Due Date for Final Payment

mm/dd/yyyy

Total of All Loans

Total of all Loans Amount Repaid

\$

\$

List of Endorsers or Guarantors

Provide for all loans listed above

Loan Source	Endorser or Guarantor Full Name	Endorser or Guarantor Full Address	Amount Guaranteed
			\$

Schedule D

Full Name of Committee/Person

Yes on 3A

Returned Contributions

(Previously reported on Schedule A - Contributions accepted and then returned to donors)

Date Accepted

mm/dd/yyyy

Date Returned

mm/dd/yyyy

Amount Returned

\$

Name returned contribution to

(Last, First)

Address returned contribution to

Street Address

Address Line 2

City

State / Province / Region

Postal / Zip Code

Country

Reason contribution returned

Returned Expenditures

(Previously reported on Schedule B - Expenditures returned or refunded to the committee)

Date Expended

09/17/2025

Date Returned

09/22/2025

Amount Returned

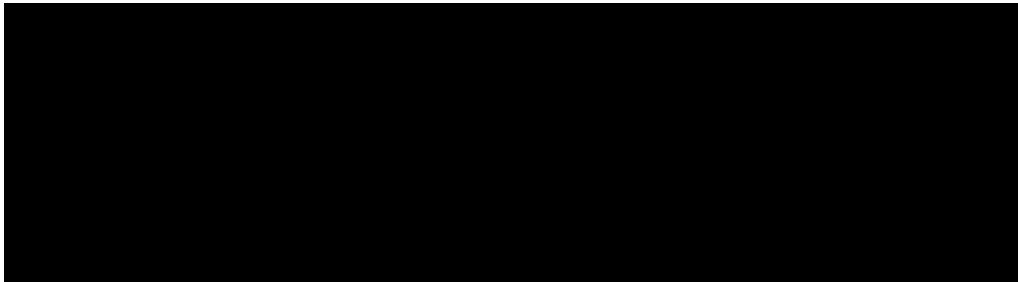
\$ 240.42

Name returned expenditure to

(Last, First)

Curt for Littleton

Address returned expenditure to



Reason expenditure returned

Reimbursement for fundraiser.

Date Expended

09/17/2025

Date Returned

09/22/2025

Amount Returned

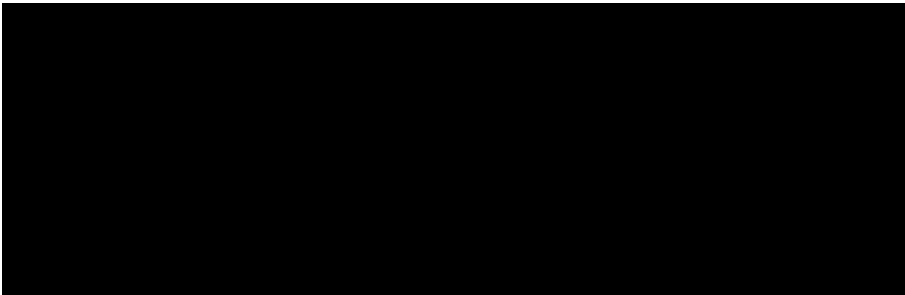
\$ 240.42

Name returned expenditure to

(Last, First)

Driscoll for Littleton Mayor

Address returned expenditure to



Reason expenditure returned

Reimbursement for Fundraiser

Statement of Non-Monetary Contributions

Full Name of Committee/Person

Yes on 3A

Statement of Non-Monetary Contributions

[Art. XXVIII, Sec. 2(5)(a)(II)(III) & Sec. 5(3) & C.R.S. 1-45-108(1)] 1-45-108(1), C.R.S.]

Date Provided	Fair Market Value	Aggregate Amount
09/01/2025	\$ 12 50	\$ 12 50

Electioneering Communication

☐ Yes ☒ No

Non-Monetary Contribution Name

(Last, First)

Rooted in Littleton

Non-Monetary Contribution Address

Street Address

4 West Dry Creek Cr

Address Line 2

Suite 100

City

Littleton

Postal / Zip Code

80120

State / Province / Region

CO

Country

USA

Description of Non-Monetary Contribution

Conference Room

Employer

(if applicable, mandatory)

N/A

Occupation

(if applicable, mandatory)

N/A

Coordinated with a Candidate/Candidate Committee or Political Party

If coordinated, then contribution must also be reported as a non-monetary expenditure on Detailed Summary. Art. XXVIII, Sec. 2(9) states: "... Expenditures that are controlled by or coordinated with a candidate or candidate's agent are deemed to be both contributions by the maker of the expenditures, and expenditures by the candidate committee."

☐ Yes ☒ No

Contributions and Expenditures Detailed Summary

Full Name of Committee/Person

Yes on 3A

Reporting Period

	From	Through
Covered	08/26/2025	09/16/2025

Contributions

Beginning reporting period funds on hand

Provided on General Information

\$ 0 00

Total Itemized Contributions (\$20 or more)

Provided on Schedule A

\$ 15,225.00

Total Non-Itemized Contributions

Provided on General Information

\$ 73.00

Loans Received

Provided on Schedule C

\$ 0 00

Total of Other Receipts

Provided on General Information

\$ 0 00

Returned Expenditures

Provided on Schedule D

\$ 480.84

Total Monetary Contributions

Sum of above

\$ 15,778.84

Expenditures

Itemized Expenditures (\$20 or more)

Provided on Schedule B

\$ 7,145.73

Total of Non-Itemized Expenditures

Provided on General Information

\$ 18.32

Loan Repayments Made

Provided on Schedule C

\$ 0.00

Returned Contributions (To donor)

Provided on Schedule D

\$ 0.00

Total Monetary Expenditures

Sum of above Expenditures

\$ 7,164.05

Total Coordinated Non-Monetary Expenditures

(Candidate/Candidate Committee & Political Parties ONLY)

\$ 0.00

Total Spending

Total Monetary Expenditures + Total Coordinated Non-Monetary Expenditures

\$ 7,164.05

Authorization

Full Name of Committee/Person

Yes on 3A

Funds on Hand at the Beginning of Reporting Period

(monetary only)

\$ 0.00

Total Monetary Contributions

From Detailed Summary Page

\$ 15,778.84

Total of Monetary Contributions & Beginning Amount

(sum of above)

\$ 15,778.84

Total Monetary Expenditures

From Detailed Summary Page

\$ 7,164.05

Funds on Hand at the End of Reporting Period (monetary)

Total of Monetary Contributions & Beginning Amount minus Total Monetary Expenditures

\$ 8,614.79

Authorization by both Registered Agent AND the Candidate are required:

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.

Registered Agent's Name *

Suzanne Taheri

Registered Agent's Signature ***Candidates Name ***

Yes on 3A

Candidates Signature *