

### General Information

Full Name of Committee/Person\*

Darren Lemorande

Committee/Person Address\*



### Committee Type \*

Candidate Committee

#### **Financial Institution Address**

Street Address

6701 s Wadsworth ave

Address Line 2

City State / Province / Region

Littleton CO Postal / Zip Code Country

80128 **United States** 

#### Type of Report\*

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

### Reporting Period

From\* Through \*

Covered Start Date 08/23/2025 End Date 09/16/2025

Funds on Hand at the Beginning of Reporting Period\*

(monetary only)

\$ 0.00

### **Declared Total Spending**

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

\$ 1,169 11

### Non-Itemized Contributions \*

(Contributions of \$19.99 or Less)

\$ 0.00

### Total of Other Receipts\*

(Interest, Dividends, etc.)

\$ 0.00

### Non-Itemized Expenditures \*

(Expenditures of \$19.99 or Less)

\$ 0.00

### Schedule A

#### Full Name of Committee/Person

Darren Lemorande

## Itemized Contributions Statement (\$20 or more)

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

Date Accepted * mm/dd/yyyy	Contribution Amt. *	Aggregate Amt.*	
Electioneering Communication *  Yes	○ No	)	
Contributor Name * (Last, First)			
Contributor Address * Street Address Address Line 2			
City	State / Pro	ovince / Region	
Postal / Zip Code	Country		
Contribution Description*			
Contributor Employer			
(if applicable, mandatory)			
Contributor Occupation (if applicable, mandatory)			

Donation Date	Donation Amour	First Name	Last Name	Address Line 1	City	State	Zip	Phone	Email	Employer	Occupation
2025-09-16	\$200.00	Donna	Cook							Self	Designer/Author
2025-09-16	\$400.00	Tom	DiGrappa							retired	retired
2025-09-15	\$50.00	Kara	Schwalm							homemaker	homemaker
2025-09-15	\$300.00	Jon	Schmidt							Eog Resources	Engineer
2025-09-15	\$400.00	Tammy	Whitney							unemployed	unemployed
2025-09-15	\$400.00	Tom	Barenberg							Tom brnrbg properties	Owner
2025-09-15	\$100.00	Suzanne	Taheri							Self	Attorney
2025-09-11	\$500.00	RICHARD	HALL							Self	Consultant
2025-09-11	\$400.00	Mark	Harris							retired	retired
2025-09-11	\$25.00	Patt	Hepola							retired	retired
2025-09-11	\$400.00	-	Brennan							retired	retired
2025-09-11	\$400.00		Palmeiro							Palmeiro Group, LLC	Owner
2025-09-10	\$50.00	Jessica	Teller								
2025-09-05	\$400.00	Chelsea	Van Dyk							unemployed	unemployed
2025-09-05	\$400.00	Peggy	Block								
2025-09-05	\$400.00	Frederick	Block								
2025-09-05	\$400.00	John	Van Dyk							Van Dyk Construction	Owner
2025-09-05	\$400.00	Ellen	Van Dyk							Van Dyk Construction	Owner
2025-09-03	\$400.00	Brian	Wheelet							unemployed	unemployed
2025-08-30	\$400.00	Janice	Lemorande							retired	retired
2025-08-29	\$400.00	Valere	Mathis							retired	retired
2025-08-29	\$400.00	Earnest	Mathis							retired	retired
2025-08-29	\$400.00	Jane	Brennan								
2025-08-29	\$400.00	Sarah	Lemorande							Johnson and Johnson	Sales Strategy
2025-08-29	\$400.00	Carrie	Wheeler							KPMG	Consultant
2025-08-29	\$400.00	Joe	Whitney							Self employed	Beverage consulting
2025-09-15	\$400.00	Bryan	Hodges							Spectracorp	Chemist
2025-09-15	\$400.00	Mary Pat	Valdes							retired	
	\$10,055.00										

# Schedule B Full Name of Committee/Person

Itemized Expenditures Statement (\$20 or more) [1-45-108(1)(a), C.R.S.] Date Expended\* Expenditure Amt\* \$ Recipient is (optional) Electioneering Communication\* Committee Yes Non-Committee O No Expenditure Name\* Expenditure Address\* Street Address Address Line 2 City State / Province / Region Postal / Zip Code Country Purpose of Expenditure\* this is a reimbursement for hand outs paid out of personal account. Date Expended\* Expenditure Amt\* Recipient is (optional) Electioneering Communication\* Committee Yes Non-Committee O No Expenditure Name\* Expenditure Address\* Street Address Address Line 2 City State / Province / Region Postal / Zip Code Country Purpose of Expenditure\* reimbursement for fund raiser apps paid out of personal account.

### Schedule C

#### Full Name of Committee/Person

#### Loans

#### **Lender Name**

(Last, First or Institution)

#### **Lender Address**

Street Address

Address Line 2

City

Oity

Postal / Zip Code

Original Amount of Loan

\$

**Loan Amount Received** 

This Reporting Period

\$

**Interest Amount Paid** 

This Reporting Period

\$

**Outstanding Balance** 

\$

\$

**Due Date for Final Payment** 

Total of all Loans Amount Repaid

List of Endorsers or Guarantors

Provide for all loans listed above

Loan Source

**Total of All Loans** 

**Endorser or Guarantor Full Name** 

Endorser or Guarantor Full Address

**Amount Guaranteed** 

\$

State / Province / Region

Country

Interest Rate

Principal Amount Paid

This Reporting Period

\$

**Total Repayments Made** 

\$

**Date Loan Received** 

\$

### Schedule D

#### **Full Name of Committee/Person**

### **Returned Contributions**

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

Date Accepted Date Returned 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 Date Returned Amount Returned

\$

Name returned expenditure to

(Last, First)

Address returned expenditure to

Street Address

Address Line 2

City State / Province / Region

Postal / Zip Code Country

Reason expenditure returned

# Statement of Non-Monetary Contributions

#### Full Name of Committee/Person

### 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				
	\$		\$				
Electioneering Communication							
Yes		□ No					
Non-Monetary Contribution Name							
(Last, First)							
Non-Monetary Contribution Addre	ss						
Street Address							
Address Line 2							
City	State / Province / Region						
Postal / Zip Code		Country					
Description of Non-Monetary Contribution							
Employer							
(if applicable, mandatory)							
Occupation							
(if applicable, mandatory)							
Coordinated with a Candidate/Can	didate 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	Namo	of Co	mmitt	ee/Per	eon
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Darren Lemorande

### Reporting Period

From

Through

Covered

#### Contributions

#### Beginning reporting period funds on hand

Provided on General Information

\$

#### **Total Itemized Contributions (\$20 or more)**

Provided on Schedule A

\$

#### **Loans Received**

Provided on Schedule C

\$

#### **Returned Expenditures**

Provided on Schedule D

\$

#### **Total Monetary Contributions**

Sum of above

\$

### Expenditures

#### Itemized Expenditures (\$20 or more)

Provided on Schedule B

\$

#### Loan Repayments Made

Provided on Schedule C

\$

#### **Total Monetary Expenditures**

Sum of above Expenditures

\$

#### **Total Coordinated Non-Monetary Expenditures**

(Candidate/Candidate Committee & Political Parties ONLY)

\$

#### **Total Spending**

Total Monetary Expenditures + Total Coordinated Non-Monetary Expenditures

\$

#### **Total Non-Itemized Contributions**

Provided on General Information

\$

#### **Total of Other Receipts**

Provided on General Information

\$

### **Total of Non-Itemized Expenditures**

Provided on General Information

\$

#### **Returned Contributions (To donor)**

Provided on Schedule D

\$

### Authorization

#### Full Name of Committee/Person

Darren Lemorande

#### Funds on Hand at the Beginning of Reporting Period

(monetary only)

\$ 0.00

#### **Total Monetary Contributions**

From Detailed Summary Page

\$ 10,055.00

### **Total of Monetary Contributions & Beginning Amount**

(sum of above)

\$ 10,055.00

#### **Total Monetary Expenditures**

From Detailed Summary Page

\$ 1,169.11

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

Total of Monetary Contributions & Beginning Amount minus Total Monetary Expenditures

\$ 8,885.89

### 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\*

Darren Lemorande

Registered Agent's Signature\*

Darren Lemorande

Candidates Name\*

Darren Lemorande

Candidates Signature\*

Darren Lemorande