Received SEP 2 1 2021



Report of Contributions and Expenditures

(1-45-108, C.R.S.)

CITY CLERK

Authorization

Full Name of Committee/Person

Gretchen Ryden

Funds on Hand at the Beginning of Reporting Period

(monetary only)

\$ 0.00

Total Monetary Contributions

From Detailed Summary Page

\$ 0.00 860100

Total of Monetary Contributions & Beginning Amount

(sum of above)

\$ 0.00

860100

Total Monetary Expenditures

From Detailed Summary Page

\$ 0.00

4388 48

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

Total of Monetary Contributions & Beginning Amount minus Total Monetary Expenditures

\$ 0.00

421252

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.

Registered Agent's Name*

Carole Downey

Registered Agent's Signature *

Carole Downey Sign

Candidates Name *

Gretchen Rydin

Submit

| Candidates Signature* | Gritibus Rydin |
|-----------------------|----------------|
| | Sign |
| Previous | |



(1-45-108, C.R.S.)

Contributions and Expenditures Detailed Summary

Full Name of Committee/Person

Gretchen Rydin

Reporting Period

From

Through

Covered

7/10/2021

9/16/2021

Contributions

Beginning reporting period funds on hand

Provided on General Information

\$ 0.00

0

Total Itemized Contributions (\$20 or more)

Provided on Schedule A

\$ 0.00

858600

Loans Received

Provided on Schedule C

\$ 0.00

1

Returned Expenditures

Provided on Schedule D

\$ 0.00

D

Total Monetary Contributions

Sum of above

\$ 0.00



860100

Expenditures

Total Non-Itemized Contributions

Provided on General Information

\$ 0.00

Total of Other Receipts

Provided on General Information

\$ 200 0

Provided on Schedule B

\$ 0.00

438848

Loan Repayments Made

Provided on Schedule C



This field contains a calculation error.

Total Monetary Expenditures

Sum of above Expenditures

\$ 0.00

438848

Total Coordinated Non-Monetary Expenditures

(Candidate/Candidate Committee & Political Parties ONLY)

\$ 0.00 4

Total Spending

Total Monetary Expenditures + Total Coordinated Non-Monetary Expenditures

\$ 0.00

438848

Previous

Total of Non-Itemized Expenditures

Provided on General Information

\$ 0.00 0

Returned Contributions (To donor)

Provided on Schedule D

\$ 0.00 0-



(1-45-108, C.R.S.)

General Information

| Full Name of Committee/Person* | |
|--------------------------------|---------------------------|
| Gretchen Rydin | |
| Committee/Person Address * | |
| Street Address | |
| 5904 S Datura St | |
| Address Line 2 | |
| | |
| City | State / Province / Region |
| hittleton | Co |
| Postal / Zip Code | Country |
| 80120 | USA |
| _ * | |
| Committee Type * | |
| Candidate Committee | * |
| Financial Institution Address | |
| Street Address | |
| 5800 5 Broadway | |
| Address Line 2 | |
| | |
| City | State / Province / Region |
| hettleton | CO |
| Postal / Zip Code | Country |
| 80131 | USA |

Type of Report*

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

Reporting Period

From*

Through *

Covered

Start Date mm/dd/yyyy

End Date mm/dd/yyyy

7/10/2021 9/16/2021

Funds on Hand at the Beginning of Reporting Period*

(monetary only)

\$ 17

Declared Total Spending

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

\$ 4388.48

Non-Itemized Contributions*

(Contributions of \$19.99 or Less)

\$ 1500

Total of Other Receipts *

(Interest, Dividends, etc.)

\$ 0

Non-itemized Expenditures *

(Expenditures of \$19.99 or Less)

\$ 74.03

Previous



(1-45-108, C.R.S.)

Schedule A

| Full Name of Committee/Person | | | |
|--|-----------------------|-------------------|--|
| Gretchen Ry | | | |
| Itemized Contributions S [1-45-108(1)(a), C.R.S.] | Statement (\$20 or mo | re) | |
| Date Accepted * | Contribution Amt. * | Aggregate Amt.* | |
| 7114121 Value is required. | \$ 10000 | \$ 0 | |
| Electioneering Communication | • | | |
| ○ Yes | Ø No | | |
| Contributor Name* (Last, First) Conklin, Comy | | | |
| Contributor Address* | | | |
| Street Address | | | |
| 6795 S Elati | | | |
| Address Line 2 | | | |
| | | | |
| City | | Province / Region | |
| hettleton | C |) | |
| Postal / Zip Code | Country | | |
| 80120 | U.S | AZ | |

| Continuation Description | Contribution | Description | * |
|--------------------------|--------------|-------------|---|
|--------------------------|--------------|-------------|---|

Donation

Contributor Employer

(if applicable, mandatory)

Seef

Contributor Occupation

(if applicable, mandatory)

Environmental Consultant

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

| <u>Uretchen</u> | | |
|--------------------------------------|---------------------------|-----------------|
| [1-45-108(1)(a), C.R.S.] | ons Statement (\$20 or mo | re) |
| Date Accepted * | Contribution Amt.* | Aggregate Amt.* |
| 7 23 21 Value is required. | \$ 100.00 | \$ 8 |
| Electioneering Communic | ation* | |
| O Yes | Ø Ne | 0 |
| Contributor Name * (Last, First) | | |
| Crowenberger | , Pat | |
| Contributor Address * Street Address | | |
| 5796 S. hale | wiew St | |
| Address Line 2 | | |
| | | |
| City | | ovince / Region |
| hittleton | CO | |
| Postal / Zip Code | Country | 1100 |
| 80190 | Wa | spahoe/USA |
| Contribution Description* | • | |
| donation | | |

| Con | tribu | itor | Emp | lover |
|-----|-------|------|---------------|-------|
| ~~" | | | ma, 1 4 1 per | |

(if applicable, mandatory)

Retired

Contributor Occupation

(if applicable, mandatory)

Retired

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt. *

8/8/21 Value is required.

\$ 2500

 $* \times \mathcal{V}$

Electioneering Communication*

O Yes

X No

Contributor Name *

(Last, First)

Hosack, Barbara

Contributor Address *

Street Address

1921 W Briarwood ave

Address Line 2

city Littleton

Postal / Zip Code

20120

State / Province / Region

CO

Country

arapahoe/USA

Contribution Description *

denoturn

(if applicable, mandatory)

Retired

Contributor Occupation

(if applicable, mandatory)

Returned

Add another contribution

Previous



(1-45-108, C.R.S.)

| Schedule | Α | | | | |
|----------|---|------|------|------|--|
| | | | | | |

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

818121

\$ 150,00

 $\times \mathscr{Y}$

Value is required.

Electioneering Communication*

O Yes

X No

Contributor Name *

(Last, First)

Lerner, Rich

Contributor Address*

Street Address

2261 W. Briarwood ave

Address Line 2

City

Littleton

Postal / Zip Code

80130

State / Province / Region

CD)

Country

arapahve / USA

Contribution Description*

Donation

(if applicable, mandatory)

Consplacy Films

Contributor Occupation

(if applicable, mandatory)

Camerman

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

edule A v

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt. *

\$ X D

\$ 5000

Value is required.

Electioneering Communication*

O Yes

⋈ No

Contributor Name *

(Last, First)

Bingham , Paul

Contributor Address*

Street Address

236 W Delaware Cir

Address Line 2

City

hettleton

Postal / Zip Code

80120

State / Province / Region

W

Country

arapative / USA

Contribution Description*

Donation

(if applicable, mandatory)

Retired

Contributor Occupation

(if applicable, mandatory)

Returned

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Scriedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt.*

8/12/21

\$ 35°°°

XØ

Value is required.

Electioneering Communication*

O Yes

⟨X No

Contributor Name*

(Last, First)

Leck, John

Contributor Address*

Street Address

Address Line 2

830 W Geddes Cir

City

hettleton

Postal / Zip Code

20120

State / Province / Region

(10)

Country

Orapahoe/USA

Contribution Description*

Donation

(if applicable, mandatory)



Contributor Occupation

(if applicable, mandatory)



Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

8/13/31

 50^{∞}

\$ X Ø

Value is required.

Electioneering Communication*

O Yes

XI No

Contributor Name*

(Last, First)

Warren, Margaret

Contributor Address*

Street Address

4440 Iule hake Dr

Address Line 2

City

Littleton

Postal / Zip Code

80120

State / Province / Region

30

Country

aupahor / USA

Contribution Description*

Donation

(if applicable, mandatory)

Retired

Contributor Occupation

(if applicable, mandatory)

Retired

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~|

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt. *

812121

\$ 50.00

\$ V D

Value is required.

Electioneering Communication*

O Yes

No No

Contributor Name *

(Last, First)

Holland, Kathryn

Contributor Address*

Street Address

6635 S. arapahoe Way

Address Line 2

Littleton

Postal / Zip Code

80120

Contribution Description*

Donatrion

State / Province / Region

 \mathbb{C}

Country

appehoe / USA

(if applicable, mandatory)

CCASA

Contributor Occupation

(if applicable, mandatory)

Add another contribution

Grant Manager

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Regdin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

ate Accepted "

Contribution Amt. *

s mo

Aggregate Amt. *

\$ X D

Value is required.

Electioneering Communication*

O Yes

₩ No

Contributor Name*

(Last, First)

Thornton, Susan

Contributor Address*

Street Address

474 W Easter Ove

Address Line 2

City

gattleton

Postal / Zip Code

20120

State / Province / Region

JV

Country

NSA

Contribution Description*

Donation

(if applicable, mandatory)

Contributor Occupation

Self Employed

(if applicable, mandatory)

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt. *

8/2/21

\$ 5000

\$ X Ø

Value is required.

Electioneering Communication*

O Yes

X No

Contributor Name*

(Last, First)

Contributor Address*

Street Address

1467 W Buarwood ave

Address Line 2

City

Sittleton

Postal / Zip Code

80120

Contribution Description*

Diration

State / Province / Region

 $\mathcal{G}\mathcal{D}$

Country

Oraphhoe/USA

(if applicable, mandatory)

Contributor Occupation

Retired

(if applicable, mandatory)

Natired

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt.*

6/1/21 \$ 77500

6 A

Value is required.

Electioneering Communication*

O Yes

No No

Contributor Name *

(Last, First)

Contributor Address*

Street Address

5904 S. Datura St

Rydin, Gletchen

Address Line 2

City

hettleton

Postal / Zip Code

80120

Contribution Description*

Donatur

State / Province / Region

an

Country

arapahoe / USA

(if applicable, mandatory)

AHN

Contributor Occupation

(if applicable, mandatory)

Social Worker

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt. *

8119121

\$ 2000

\$ 0

Value is required.

Electioneering Communication*

O Yes

No X

Contributor Name*

(Last, First)
Morgan , Julie

Contributor Address*

Street Address

2213 & Deurnay

Address Line 2

City

hakewood

Postal / Zip Code

80338

Contribution Description*

Donation

State / Province / Region

CD

Country

(if applicable, mandatory)

Contributor Occupation

NHA

(if applicable, mandatory)

Clinician

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

8 124 | 21

Contribution Amt. *

s moo

Aggregate Amt. *

5 ()

Value is required.

Electioneering Communication*

O Yes

No No

Contributor Name*

(Last, First)

Guyman-Henderson, Julia

Contributor Address*

Street Address

162 W Freemont are

Address Line 2

City

hetbleton

Postal / Zip Code

80126

State / Province / Region

OD

Country

arapature/USA

Contribution Description*

Donation

(if applicable, mandatory)

Self Employed
Contributor Occupation

(if applicable, mandatory)

Add another contribution

attorne

Previous

Pill



Report of Contributions and Expenditures

(1-45-108, C.R.S.)

Schedule A

~|

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

8/24/21

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

\$ V

i A

Value is required.

Electioneering Communication*

O Yes

X No

Contributor Name*

(Last, First) Withers, Marylin

Contributor Address*

Street Address

6867 & Hell St

Address Line 2

City

huttleton

Postal / Zip Code

80190

Contribution Description*

Denation

State / Province / Region

(1)

Country

Brapahoe /USA

2.4

Contributor Employer

(if applicable, mandatory)

Contributor Occupation

Retried

(if applicable, mandatory)

Retired

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

8124121

Date Accepted*

Contribution Amt. *

Aggregate Amt. *

s -(-)

\$ 100,00

Value is required.

Electioneering Communication*

O Yes

No No

Contributor Name*

(Last, First)

Reichardt, Robert

Contributor Address*

Street Address

607 & hakeview St

Address Line 2

City

Relleton

Postal / Zip Code

80120

Contribution Description*

Denation

State / Province / Region

(DD)

Country

arapahoe/USA

(if applicable, mandatory)

A/A Consulting

Contributor Occupation

(if applicable, mandatory)

Educator

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

9/21/21

\$ 10000

\$ 0

Value is required.

Electioneering Communication*

O Yes

X No

Contributor Name *

(Last, First)

Crossen, Karen

Contributor Address*

Street Address

1435 W Hindsdate

Address Line 2

City

hittleton

Postal / Zip Code

80190

State / Province / Region

Country

arapalise / USA

Contribution Description*

Denalion

(if applicable, mandatory)

Contributor Occupation

(if applicable, mandatory)

Retired

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt. *

8/28/21

 $$50^{\infty}$

\$ A

Value is required.

Electioneering Communication*

O Yes

X No

Contributor Name*

(Last, First)

Eckel Kathleen

Contributor Address*

Street Address

5378 S. Louthan St

Address Line 2

City

hittleton

Postal / Zip Code

80120

Contribution Description*

Doration

State / Province / Region

00

Country

Diapahoe/USA

(if applicable, mandatory)

Semaphore Business Sotutions

Contributor Occupation

(if applicable, mandatory)

HR Manager

Add another contribution

Previous

Next

2/2



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

9/01/21

s 10000

S A

Value is required.

Electioneering Communication*

O Yes

X No

Contributor Name*

(Last, First)

Kast, Rebecca

Contributor Address*

Street Address

1940 W anapahue Rd

Address Line 2

City

hettleton

Postal / Zip Code

80120

Contribution Description*

Donation

State / Province / Region

CD

Country

Drapahoe/USA

(if applicable, mandatory)

Contributor Occupation

(if applicable, mandatory)

Netured

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

9/01/21

\$ 500

\$ 4)

Value is required.

Electioneering Communication*

O Yes

₩ No

Contributor Name *

(Last, First)

Engel, angela

Contributor Address*

Street Address

1081 Synotswood St

Address Line 2

City

Littleton

Postal / Zip Code

06108

Contribution Description*

Donation

State / Province / Region

(J)

Country

Drapahoe/USA

(if applicable, mandatory)
Self Enployed

Contributor Occupation

(if applicable, mandatory)

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

912121

Value is required.

Electioneering Communication*

O Yes

No No

Contributor Name *

(Last, First)

Contributor Address

Street Address

1435 W Hillsdale Dr

Address Line 2

Postal / Zip Code

80190

Contribution Description*

Direction

State / Province / Region

brapahoe / USA

9/20/21, 8:02 AM

New Submission

Contributor Employer

(if applicable, mandatory)

Colorado School of Minus Contributor Occupation

(if applicable, mandatory)

Add another contribution

Offiliate Faculity

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt.*

Value is required.

\$ 4000

\$ 0

Electioneering Communication*

Whalen Maureen

O Yes

No No

Contributor Name *

(Last, First)

Contributor Address*

Street Address

6042 J Hell St

Address Line 2

City

hettleton

Postal / Zip Code

06108

Contribution Description*

Donation

State / Province / Region

00

Country

aupative just

(if applicable, mandatory)

Contributor Occupation

(if applicable, mandatory)

Occupation of Theroput

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

\$ 4000

Value is required.

Electioneering Communication*

O Yes

No

Contributor Name *

(Last, First)

Hawley, Benose

Contributor Address*

Street Address

2231 W Driaiwood Cure

Postal / Zip Code

80120

State / Province / Region

Orapahoe / USA

Contribution Description*

(if applicable, mandatory)

Charg Has petal

Contributor Occupation

(if applicable, mandatory)

Add another contribution

Social Worker

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Value is required.

Contribution Amt.*

Aggregate Amt. *

7/10/21

\$ 25000

BA

Electioneering Communication *

() Yes

X No

Contributor Name *

(Last, First)

Williman, Kelly

Contributor Address*

Street Address

2282 W Branwood ave

Address Line 2

City

hittleton

Postal / Zip Code

80120

State / Province / Region

D

Country

arapahue / USA

Contribution Description*

Donation

(if applicable, mandatory)
Chuldren's Hospital

Contributor Occupation

(if applicable, mandatory)

Add another contribution

Registered Nuise

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

16|01|7 Value is required.

\$ 25000

i-1)-

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, First)

Rydin, Melinda

Contributor Address*

Street Address

205 Shipland Dr

Address Line 2

City

Crystal Lake

Postal / Zip Code

60012

State / Province / Region

سا سلہ

Country

USA

Contribution Description*

Donation

(if applicable, mandatory)

Contributor Occupation

(if applicable, mandatory)

Add another contribution

Board Member

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Ryclin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

7/10/21

Value is required,

Electioneering Communication*

() Yes

X No

Contributor Name *

(Last, First)

Contributor Address **

Street Address

522 Romberg Dr

Address Line 2

City Junny vale Postal/Zip Code

74087

Contribution Description*

Distance

State / Province / Region

Country

1154

(if applicable, mandatory)
Wickhield Mattin

Contributor Occupation

(if applicable, mandatory)

HR

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt. *

11117

\$ 5000

3 A

Electioneering Communication*

() Yes

X No

Contributor Name *

(Last, First)

Cooper, Scott

Contributor Address*

Street Address

14 5th St NE

Address Line 2

City

Washington

Postal / Zip Code

20002

Contribution Description*

Donation

State / Province / Region

DC

Country

USA

(if applicable, mandatory)

Human Rights List
Contributor Occupation

(if applicable, mandatory)

Add another contribution

Monprofied headership

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt.*

Aggregate Amt. *

7/12/21 \$ 50.5

Value is required.

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, First)

Daniel, Lawrence

Contributor Address*

Street Address

714 Whittier St NW

Address Line 2

City

Washington

Postal / Zip Code

20012

State / Province / Region

Country

USA

Contribution Description*

Donation

1/2

(if applicable, mandatory)

Indegrated Capital Stratagies, LC

Contributor Occupation

(if applicable, mandatory)

Managing Director

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt.*

Aggregate Amt. *

7/12/21

\$ 10000

5 A

Value is required.

Electioneering Communication*

() Yes

No

Contributor Name*

(Last, First)

Budy, Magan
Contributor Address*

Stroot Addrose

2351 & Braun Way

Address Line 2

City

hakewood

Postal / Zip Code

20228

Contribution Description*

Donation

State / Province / Region

Horson /USA

Country

(if applicable, mandatory)

AU

Contributor Occupation

(if applicable, mandatory)

NA

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

\$ 100co

Aggregate Amt. *

MEILL

Value is required.

Electioneering Communication*

Geitner, angela

Yes

X No

Contributor Name*

(Last, First)

Contributor Address*

Street Address

Roxborough PL

Address Line 2

City

asermess

Postal / Zip Code

100010

Contribution Description*

Mittomy

State / Province / Region

Country

MSA

(if applicable, mandatory)

Self Employed
Contributor Occupation

(if applicable, mandatory)

Add another contribution

Gramer

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt.*

Aggregate Amt.*

7[13]21 Value is required. \$ 25000

5 A

Electioneering Communication*

Hell, marta

O Yes

No

Contributor Name*

(Last, First)

Contributor Address*

Street Address

268 hegacy Ranch Lane

Address Line 2

City

Durango Postal / Zip Code

81303

Contribution Description*

Donation

State / Province / Region

CO

Country

USA

(if applicable, mandatory)

NA

Contributor Occupation

(if applicable, mandatory)

NA

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt.*

Aggregate Amt. *

7 | 15 | 21 Value is required. \$ 2500

\$ A

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, Firet)

Gumes, Catherine

Contributor Address*

Street Address

1410 Forest Trails Dr

Address Line 2

City

Castle Rock

Postal / Zip Code

80108

Country

USA

State / Province / Region

Contribution Description*

Donation

(if applicable, mandatory)

AU

Contributor Occupation

(if applicable, mandatory)

NA

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt.*

Aggregate Amt.*

7/15/21

\$ 50100

B-A-

Value is required.

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, First)

Masomino, Elixa

Contributor Address *

Street Address

7327 Jakoma Que

Address Line 2

Jakoma Park

Postal / Zip Code

20912

Contribution Description*

Donation

State / Province / Region

MD

Country

USA

(if applicable, mandatory)
Iduman Rights First

Contributor Occupation

(if applicable, mandatory)

Add another contribution

Diesident

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt.*

Aggregate Amt.*

7 | 15 | 2 | Volue is required. \$ 100.00

8 A

Electioneering Communication*

O Yes

X No

Contributor Name*

(Last, First)

Contributor Address*

Hulse, Kurt

Street Address

6903 & Prince Cir

Address Line 2

City

hittleton

Postal / Zip Code

06108

Contribution Description*

Donation

State / Province / Region

OD

Country

Orapahoe/USA

(if applicable, mandatory)

AW

Contributor Occupation

(if applicable, mandatory)

AUA

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

edule A 💙

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt.*

1111121

\$ 10000

1

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, First)

Larrey, Catherine
Contributor Address*

Street Address

6143 Weeping Willow Lane

Address Line 2

City

ROSCOTO Postal / Zip Code

61073

Contribution Description*

Donation

State / Province / Region

IL

Country

(if applicable, mandatory)

NA

Contributor Occupation

(if applicable, mandatory)

NA

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt.*

Aggregate Amt.*

7 | 27 | 21 Value is required.

\$ 300°

3 D

Electioneering Communication*

Yes

X No

Contributor Name*

(Last, First)

Ryden, Carrie & Russ

Contributor Address*

Street Address

2517 S. Eldridge Ct

Address Line 2

City

Lakewood

Postal / Zip Code

80778

Contribution Description*

Donation

State / Province / Region

U

Jefferson / USA

(if applicable, mandatory)

Contributor Occupation

Nectumic

Project Mgr

(if applicable, mandatory)

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

Electioneering Communication*

Shorr. David

() Yes

No

Contributor Name*

(Last, First)

Contributor Address*

Street Address

Park St.

Address Line 2

Stevens Point

Postal / Zip Code

24481

Contribution Description*

mitancy

State / Province / Region

Country

(if applicable, mandatory)

Self Employed

Contributor Occupation

(if applicable, mandatory)

Evaluation Consultant

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~|

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Value is required.

Contribution Amt. *

Aggregate Amt. *

7/31/21

\$ 2500

\$ A

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, First)

Sturgeon, Paige
Contributor Address*

Street Address

4429 W Ponds Cir

Address Line 2

City

hettleton

Postal / Zip Code

80123

State / Province / Region

CD

Country

arapahue /USA

Contribution Description*

Donation

(if applicable, mandatory)

Contributor Occupation

Human Services

(if applicable, mandatory)

Add another contribution

Fraid Claim Investagator

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt.*

Aggregate Amt.*

8/02/21

\$ 500

\$ A

Value is required.

Electioneering Communication*

O Yes

X No

Contributor Name*

(Last, First)

Popkowski, hynne

Contributor Address*

Street Address

6527 & Loudhan St

Address Line 2

City

hittleton

Postal / Zip Code

80130

Contribution Description*

Donation

State / Province / Region

A

Crapative / USA

(if applicable, mandatory)

NA

Contributor Occupation

(if applicable, mandatory)

AN

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted * 8/03/21 Contribution Amt. *

Aggregate Amt. *

\$ 2500

Value is required.

Electioneering Communication*

() Yes

No

Contributor Name *

(Last, First)

Contributor Address*

Street Address

Oriver hans

Best, Beth

Address Line 2

City

Postal / Zip Code

80123

State / Province / Region

arapahoe/USA

Contribution Description*

nutional

(if applicable, mandatory)

Contributor Occupation

LPS Foundation

(if applicable, mandatory)

Add another contribution

Nonprofet

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Ryclin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt.*

8/04/21 Value is required.

\$ 10000

Electioneering Communication *

() Yes

X No

Contributor Name*

(Last, First)

Contributor Address *

Street Address

4555 Gettysburg Dr

Graunke, alixon

Address Line 2

Rolling Meadows

Postal / Zip Code

120008

Contribution Description*

Miltonal

State / Province / Region

Country

115H

(if applicable, mandatory)

NIA

Contributor Occupation

(if applicable, mandatory)

NA

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt.*

Value is required.

\$ 1000

\$ -{}

Electioneering Communication*

() Yes

X No

Contributor Name *

(Last, First)

Meager, M Stewart

Contributor Address*

Street Address

5245 S. Croder St

Address Line 2

City

hettleton

Postal / Zip Code

80120

Contribution Description*

Donation

State / Province / Region

00

Country

Drapahoe/USA

(if applicable, mandatory)

Contributor Occupation

Realtor Emeritus

(if applicable, mandatory)

Add another contribution

Lolf Employed

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt.*

Aggregate Amt. *

16/00/0

\$ 5000

8 A

Electioneering Communication*

O Yes

X No

Contributor Name*

(Last, First)

Watson, Kay

Contributor Address*

Street Address

7450 & Curtise Ct

Address Line 2

City

hettleton

Postal / Zip Code

80111

Contribution Description*

Donation

State / Province / Region

9

Country

(if applicable, mandatory)

K Watson Properties

Contributor Occupation

(if applicable, mandatory)

Sales

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Value is required.

Contribution Amt. *

Aggregate Amt. *

16/80/8

\$ 10000

5 - | } -

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, First)

Kleiman, Bebe

Contributor Address*

Street Address

7464 & Pennsylvania St

Address Line 2

City

hittleton

Postal / Zip Code

80122

Contribution Description*

Donation

State / Province / Region

(y)

Country

arapahoe, USA

(if applicable, mandatory)

Doctors Care

Contributor Occupation

(if applicable, mandatory)

CEO

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Ryclin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

818121

\$ 25000

Electioneering Communication *

() Yes

X No

Contributor Name*

(Last, First)

Vieux, Hardy

Contributor Address*

Street Address

7021 Stone Inlet De

Address Line 2

Postal / Zip Code

22060

State / Province / Region

Country

LASA

NA

Contribution Description*

Mittanul

(if applicable, mandatory)
Human Rights First

Contributor Occupation

(if applicable, mandatory)

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

v

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Value is required.

Contribution Amt. *

Aggregate Amt. *

8/13/3/

\$ 100000

\$ A

Electioneering Communication*

) Yes

X No

Contributor Name*

(Last, First)

Contributor Address*

Street Address

5773 Shasta Cir

Hopping, Bell

Address Line 2

City

Littleton

Postal / Zip Code

80123

Contribution Description*

Donation

State / Province / Region

3

Country

(if applicable, mandatory)

NA

Contributor Occupation

(if applicable, mandatory)

NA

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~|

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt.*

Volue is required.

\$ 10000

5 A

- Care are

Electioneering Communication*

() Yes

X No

Contributor Name *

(Last, Firet) Shompson, Sloy

Contributor Address*

Street Address

7525 & Utica Dr# 135

Address Line 2

City

hitlleton

Postal / Zip Code

36108

Contribution Description*

Donation

State / Province / Region

Cn

Country

(if applicable, mandatory)

AHN

Contributor Occupation

(if applicable, mandatory)

Add another contribution

Therapist

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt. *

8112121 Value is required. \$ 7500

3-A-

Electioneering Communication *

() Yes

X No

Contributor Name *

(Last, First)

Marchetti, Chris

Contributor Address*

Street Address

6477 & Stern Pluy Address Line 2

City

State / Province / Region

n

Country

USA

Postal / Zip Code

80130

Contribution Description*

Donation

(if applicable, mandatory)

Marchetti Data Solutions

analyst

Contributor Occupation

(if applicable, mandatory)

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~|

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt.*

Value is required.

\$ 10000

3 A

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, First)

Contributor Address*

Street Address

5918 & Hell St

Graham, Ruth

Address Line 2

City

Postal / Zip Code

80120

Contribution Description*

Donation

State / Province / Region

(4)

Country

(if applicable, mandatory)

Self Employed
Contributor Occupation

(if applicable, mandatory)

Add another contribution

acupuncturist

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

811121

Contribution Amt.*

Aggregate Amt. *

Value is required.

\$ 5000

Electioneering Communication*

Yes

X No

Contributor Name*

(Last, First)

Contributor Address*

Street Address

19065 & Bitlany Pl

Address Line 2

City

Postal / Zip Code

Contribution Description*

Mitomy

State / Province / Region

Country

(if applicable, mandatory)

AHN

Contributor Occupation

(if applicable, mandatory)

Clinical Supervisor

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Ryclin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt.*

Aggregate Amt. *

1217118

\$ 50000

3 A

Electioneering Communication*

() Yes

X No

Contributor Name *

(Last, First)

Contributor Address*

Street Address

21500 Blunt Road

matthews, Chris

Address Line 2

City

Germantown

Postal / Zip Code

20876

Contribution Description*

Donation

State / Province / Region

MD

Country

(if applicable, mandatory)

NA

Contributor Occupation

(if applicable, mandatory)

AM

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~ |

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt.*

8117121

s 50°C

8 A

Electioneering Communication*

O Yes

X No

Contributor Name*

(Last, Firet)

anderson, Matthew

Contributor Address*

Street Address

6350 D Havana St

Address Line 2

City

Englew ood

Postal / Zip Code

80111

Contribution Description*

Donatum

State / Province / Region

00

Country

(if applicable, mandatory)

AHN

Contributor Occupation

(if applicable, mandatory)

Counseloz

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~|

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt. *

190618

\$ 10000

\$.

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, First)

Mohr, Karalynne

Contributor Address*

Street Address

6965 W 54th Owe

Address Line 2

Citv

awada

Postal / Zip Code

80002

State / Province / Region

20

Country

USA

Contribution Description*

Donation

(if applicable, mandatory)

AHN

Contributor Occupation

(if applicable, mandatory)

Add another contribution

Therapist

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Ryclin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

8/11/21

Value is required.

Electioneering Communication *

() Yes

X No

Contributor Name *

(Last, First)

Contributor Address*

Street Address

6165 & Covertry Lane W

Address Line 2

Postal / Zip Code

ESICK

State / Province / Region

Country

Contribution Description*

Mitamy

(if applicable, mandatory)

Contributor Occupation

Luckheed Martin

(if applicable, mandatory)

Add another contribution

aerospace

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

8/24/21

\$ 2500

Electioneering Communication*

Bullock, Ho

() Yes

X No

Contributor Name *

(Last, First)

Contributor Address *

Street Address

7215 & Sundown Circle

Address Line 2

City

Postal / Zip Code

XOIX

Contribution Description*

Donation

State / Province / Region

Country

(if applicable, mandatory)

Retired

Contributor Occupation

(if applicable, mandatory)

Add another contribution

Educator

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Ryclin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

16/26/8

\$ 10000

Value is required.

Electioneering Communication*

() Yes

X No

Contributor Name *

(Last, First)

Meli-Reumann, Melissa

Contributor Address*

Street Address

10122 Woodlose Ct

Address Line 2

Highlands Kanch

Postal / Zip Code

20129

Contribution Description*

Donation

State / Province / Region

Country

(if applicable, mandatory)

AHN

Contributor Occupation

(if applicable, mandatory)

Therapist
Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~|

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt.*

9195 | al

Value is required.

\$ 100°CO

B A

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, First)

Brock, Janet

Contributor Address*

Street Address

1321 hake Drue West #115

Address Line 2

City

Chanhassen

Postal / Zip Code

55317

State / Province / Region

mN

Country

USA

Contribution Description*

Donation

(if applicable, mandatory)

NA

Contributor Occupation

(if applicable, mandatory)

NA

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt.*

8 128 121

\$ 150.00

3.

Electioneering Communication*

○ Yes

X No

Contributor Name*

(Last, First)

Breit, Getchen

Contributor Address*

Street Address

4555

lettysburg Dr

Address Line 2

Rolling Meadows

Postal / Zip Code

6000R

Contribution Description*

Donation

State / Province / Region

TL

Country

USA

(if applicable, mandatory)

NA

Contributor Occupation

(if applicable, mandatory)

AM

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt.*

Aggregate Amt.*

Value is required.

\$ 10000

\$ --

Electioneering Communication *

() Yes

X No

Contributor Name*

(Last, First)

Warren-Gully, Carrie

Contributor Address*

Street Address

7009 & Stelle St

Address Line 2

Contonnico

Postal / Zip Code

80122

State / Province / Region

20

Country

USA

Contribution Description*

Donation

(if applicable, mandatory)

NA

Contributor Occupation

(if applicable, mandatory)

MA

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Value is required.

Contribution Amt. *

Aggregate Amt. *

9/01/21

\$ 100000

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, First)

acres, Lauren

Contributor Address*

Street Address

5805 & Lakerius H

Address Line 2

City

Postal / Zip Code

80120

State / Province / Region

Country

Contribution Description*

Dimotion

(if applicable, mandatory)

GE Johnson

Contributor Occupation

(if applicable, mandatory)

Marketing Mgr

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt.*

(12) 21 \$ 500

Value is required.

Electioneering Communication*

() Yes

No

Contributor Name*

(Last, First)

Mc Conlogue, Stacety

Contributor Address*

Street Address

4293 W Pondview PL

Address Line 2

City

hettleton

Postal / Zip Code

80123

State / Province / Region

CLO

Country

USt

Contribution Description*

Donation

(if applicable, mandatory)

NA

Contributor Occupation

(if applicable, mandatory)

NA

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

| Full | Name | of Co | nmmit | tee/Pe | rean |
|------|------|-------|-------|--------|------|
| | | | | | |

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt.*

10H21 Value is required. \$ 5000

\$ -{}

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, First)

Melner, Bonnie
Contributor Address*

Street Address

583 Karium Lane

Address Line 2

Crystal Late

Postal / Zip Code

600012

State / Province / Region

IL

Country

USA

Contribution Description*

Donation

(if applicable, mandatory)

Contributor Occupation

Justrict 200

Sub teacher

(if applicable, mandatory)

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt.*

9/03/21

s 10000

B. - ()

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, First)

Contributor Address*

Shorr, David

Street Address

2509 Perk St

Address Line 2

Stevens Point

Postal / Zip Code

18446

Contribution Description*

Donation

State / Province / Region

WT

Country

USA

9/20/21, 8:02 AM

New Submission

Contributor Employer

(if applicable, mandatory)

Contributor Occupation

(if applicable, mandatory)

Evaluation Consultant

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt. *

Aggregate Amt. *

9/04/21

\$ 100°C

\$ -{}

Value is required.

Electioneering Communication*

() Yes

X No

Contributor Name*

(Last, First)

Chute, Margi

Contributor Address*

Street Address

1467 W Buarwood Ove

Address Line 2

Citv

httleton

Postal / Zip Code

20120

State / Province / Region

N

Country

USt

Contribution Description*

Donation

(if applicable, mandatory)

NA

Contributor Occupation

(if applicable, mandatory)

NA

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

v

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Value is required.

Contribution Amt. *

Aggregate Amt.*

9/06/21

\$ 2500

8 A

Electioneering Communication*

() Yes

No

Contributor Name*

(Last, First)

Contributor Address*

Street Address

13 Dewer Lane

Address Line 2

Citv

hittleton

Postal / Zip Code

80123

Contribution Description*

Donation

State / Province / Region

2

Country

USt

(if applicable, mandatory)

LPS Foundation

Contributor Occupation

(if applicable, mandatory)

Add another contribution

Monprofit

Previous



(1-45-108, C.R.S.)

Schedule A

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Contribution Amt. *

Aggregate Amt.*

Value is required,

\$ 500°°

\$.

Electioneering Communication*

Prado, Robert

() Yes

X No

Contributor Name*

(Last, First)

Contributor Address*

Street Address

5827 & houthan St

Address Line 2

City

hettleton

Postal / Zip Code

06108

Contribution Description*

Donation

State / Province / Region

20

Country

USt

Contributor Employer

(if applicable, mandatory)

NA

Contributor Occupation

(if applicable, mandatory)

NA

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted *

Contribution Amt.*

Aggregate Amt. *

Value is required.

\$ 9200

\$.A

Electioneering Communication*

Ringer, Jane

() Yes

X No

Contributor Name*

(Last, First)

Contributor Address*

Street Address

2446 W Sunset Dr

Address Line 2

) attleton

Postal / Zip Code

80190

State / Province / Region

W

Country

Contribution Description*

Donation

(if applicable, mandatory)

NA

Contributor Occupation

(if applicable, mandatory)

MA

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

~|

Full Name of Committee/Person

Gretchen Rydin

Itemized Contributions Statement (\$20 or more)

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

Date Accepted*

Value is required.

Contribution Amt. *

Aggregate Amt. *

411512

\$ 2500

\$ -

Electioneering Communication *

O Yes

₩ No

Contributor Name *

(Last, First)

martinez, Shellene

Contributor Address *

Street Address

7835 W Glasgow PL

Address Line 2

Lettletone

Postal / Zip Code

8008

Contribution Description*

Donation

State / Province / Region

OD

Country

UST

(if applicable, mandatory)

AHN

Contributor Occupation

(if applicable, mandatory)

Add another contribution

Previous



(1-45-108, C.R.S.)

Schedule A

Full Name of Committee/Person

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

Date Accepted*

Contribution Amt. *

Aggregate Amt. *

5000

Value is required.

Electioneering Communication*

Graham, andrew

Yes

O No

Contributor Name*

(Last, First)

Contributor Address*

Street Address

5720 D. Morning Glory Lane

Address Line 2

City

hittleton

Postal / Zip Code

80123

State / Province / Region

CO

Country

USA

Contribution Description*

(if applicable, mandatory)

Self Employed
Contributor Occupation

(if applicable, mandatory)

Add another contribution

Previous

Expenditure Amt*

Electioneering Communication*

\$ 20000

O Yes

🔉 No



Report of Contributions and Expenditures

(1-45-108, C.R.S.)

Schedule B

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

16/01/2

Value is required.

Recipient is (optional)

Committee

O Non-Committee

Expenditure Name*

Act Blue

Expenditure Address*

Street Address

POBOX 441146

Address Line 2

State / Province / Region

MA

Country

USA

City

Somewelle

Postal / Zip Code

Da144

Purpose of Expenditure *

NAV



(1-45-108, C.R.S.)

Schedule B

Full Name of Committee/Person

Gretchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

8/06/21

Value is required.

Recipient is (optional)

- Committee
- Non-Committee

Expenditure Name*

CVS

Expenditure Address*

Street Address

9936 W Bowles Cive

Address Line 2

City

Electioneering Communication *

\$ 1(),50

Expenditure Amt*

O Yes

Ø∕ No

Postal / Zip Code

KOLZZ

State / Province / Region

Country

USA

Purpose of Expenditure *

Photo conds for fundrauser



(1-45-108, C.R.S.)

Schedule B

Full Name of Committee/Person

Gretchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

8/12/21

Value is required.

Recipient is (optional)

Committee

Non-Committee

Expenditure Name*

Party City

Expenditure Address*

Street Address

8222 & Yosemite St

Address Line 2

Suite 100

City

Centennial

Postal / Zip Code

80112

Purpose of Expenditure *

Balloons

Expenditure Amt*

\$ 7.94

Electioneering Communication*

O Yes

NO

State / Province / Region

9

Country



(1-45-108, C.R.S.)

Schedule B

Full Name of Committee/Person

Gratchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

8/12/21

Value is required.

Recipient is (optional)

Committee

Non-Committee

Expenditure Name*

Nethrands Media Corp

Expenditure Address*

Street Address

14550 Beechnut St

Address Line 2

City

Houston

Postal / Zip Code

77083

Purpose of Expenditure *

100 Yard signs

Expenditure Amt*

\$ 214.40

Electioneering Communication*

O Yes

₩No

State / Province / Region

图丁》

Country

Expenditure Amt*

O Yes

₩ No

Electioneering Communication*



Report of Contributions and Expenditures

(1-45-108, C.R.S.)

Schedule B

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

8/12/21

Value is required.

Recipient is (optional)

Committee

O Non-Committee

Expenditure Name*

Mc Kinners Pigga

Expenditure Address*

Street Address

2389 Main St

Address Line 2

State / Province / Region

7

Country

USA

Postal / Zip Code

80120

Purpose of Expenditure*

fundiaiser



(1-45-108, C.R.S.)

Schedule B

Full Name of Committee/Person

Gretchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

7/15/21

Value is required.

Recipient is (optional)

Committee

Non-Committee

Expenditure Name*

Gretchen Ryden

Expenditure Address*

Street Address

5904 S Datura St

Address Line 2

Postal / Zip Code

80120

Purpose of Expenditure *

Float in parade

Expenditure Amt*

\$ 17500

Electioneering Communication*

O Yes

2(No

State / Province / Region

Country

Expenditure Amt*

Yes

X No

Electioneering Communication*



Report of Contributions and Expenditures

(1-45-108, C.R.S.)

Schedule B

Full Name of Committee/Person

Gretchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

7/14/21

Value is required.

Recipient is (optional)

Committee

Non-Committee

Expenditure Name*

angelicamelo Sevrano

Expenditure Address*

Street Address

1,42

Deellel hane

Address Line 2

City

State / Province / Region

Elmont Postal / Zip Code

11003

Purpose of Expenditure*

Logo Design

Country



(1-45-108, C.R.S.)

Schedule B

Full Name of Committee/Person

Gratchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended *

7/28/21

Value is required.

Recipient is (optional)

Committee

Non-Committee

Expenditure Name *

Orapative County

Expenditure Address*

Street Address

PO BOX 9011

Address Line 2

Postal / Zip Code

80160

Purpose of Expenditure*
County Voter File

Expenditure Amt*

\$ 2500

Electioneering Communication *

O Yes

X No

State / Province / Region

an

Country



(1-45-108, C.R.S.)

Schedule B

Full Name of Committee/Person

Gratchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

7/30/21

Value is required.

Recipient is (optional)

Committee

Non-Committee

Expenditure Name*

Vistaprint

Expenditure Address*

Street Address

275 Wyman St

Address Line 2

Expenditure Amt*

\$ 3330

Electioneering Communication*

O Yes

X No

4) altham

Postal / Zip Code

02457

Purpose of Expenditure *

Banners

State / Province / Region

MA

Country



(1-45-108, C.R.S.)

Schedule B

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

8/6/21

Value is required.

Recipient is (optional)

O Committee

Non-Committee

Expenditure Name*

Expenditure Address *

Street Address

275 Wyman St

Address Line 2

Expenditure Amt*

\$ 174.99

Electioneering Communication*

O Yes

✓ No

City

Waltham

Postal / Zip Code

122451

Purpose of Expenditure *

Lit, Stickers, Hat, Business Carols State / Province / Region

MA

Country



(1-45-108, C.R.S.)

Schedule B

Full Name of Committee/Person

Gratchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended *

8103/21

Value is required.

Recipient is (optional)

Committee

Non-Committee

Expenditure Name*

Name Badges Inc

Expenditure Address*

Street Address

12240 SW 53 rd St

Address Line 2

City

Postal / Zip Code

33330

Purpose of Expenditure *

Name Badge

Expenditure Amt*

\$ 110.40

Electioneering Communication*

O Yes

₩ No

State / Province / Region

FL

Country



(1-45-108, C.R.S.)

Schedule B

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

6/03/21

Value is required.

Recipient is (optional)

O Committee

Non-Committee

Expenditure Name*

Expenditure Address*

Street Address

Address Line 2

Website

City

Postal / Zip Code

Purpose of Expenditure*
Website Domain Name

\$ 19.76

Electioneering Communication*

Expenditure Amt*

O Yes

₩ No

State / Province / Region

Country



(1-45-108, C.R.S.)

Schedule B

| Full Name of Committee/Person | | | | | |
|-------------------------------|-------|--|--|--|--|
| Gratchen | Rydin | | | | |

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

Value is required.

Recipient is (optional)

Committee

Non-Committee

Expenditure Name*

Word pubs

Expenditure Address*

1) ebsite

Street Address

Address Line 2

City

Postal / Zip Code

Purpose of Expenditure *

Website Mgmt

Expenditure Amt*

\$ 960°

Electioneering Communication*

O Yes

₩ No

State / Province / Region

Country



(1-45-108, C.R.S.)

Schedule B

Full Name of Committee/Person

Gratchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

Value is required.

Recipient is (optional)

- Committee
- Non-Committee

Expenditure Name*

Banners on the Cheap

Expenditure Address*

Street Address

11525 A Stone Hallow Dr

Address Line 2

Suite 100

City

Postal / Zip Code

78578

Purpose of Expenditure*

Sanners

Expenditure Amt*

Electioneering Communication*

- O Yes
- X No

State / Province / Region

Country



(1-45-108, C.R.S.)

Schedule B

~

Full Name of Committee/Person

Gretchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

8/20/21

Value is required.

Recipient is (optional)

Committee

Non-Committee

Expenditure Name*

Party City
Expenditure Address*

Street Address

7735 W Long Or

Address Line 2

Expenditure Amt*

\$ 19.48

Electioneering Communication*

O Yes

X No

City

hittleton

Postal / Zip Code

80123

Purpose of Expenditure *

Ballions

State / Province / Region

00

Country

Expenditure Amt*

\$ 2554.85

○ Yes

 No

Electioneering Communication*



Report of Contributions and Expenditures

(1-45-108, C.R.S.)

Schedule B

| Full | Name | of | Committee/Person |
|--------|----------|--------|------------------|
| 0 7454 | 11411114 | \sim | |

Gretchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

Value is required.

Recipient is (optional)

- Committee
- Non-Committee

Expenditure Name*

U8PS

Expenditure Address*

Street Address

5753 S Prince St

Address Line 2

City

State / Province / Region

 (\mathcal{L})

Country

USA

Postal / Zip Code

80120

Purpose of Expenditure *

1/2

Postage



(1-45-108, C.R.S.)

Schedule B

Full Name of Committee/Person

Gratchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

Value is required.

Recipient is (optional)

Committee

Non-Committee

Expenditure Name *

Expenditure Address *

Street Address

Wyman St

Address Line 2

Expenditure Amt*

\$ 579.27

Electioneering Communication*

O Yes

(X) No

Waltham

Postal / Zip Code

1)2451

Purpose of Expenditure *

hut, Postcards, Labels

State / Province / Region

MA

Country



(1-45-108, C.R.S.)

Schedule B

~

Full Name of Committee/Person

Gratchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

Value is required.

Recipient is (optional)

Committee

Non-Committee

Expenditure Name*

LEAD Colorado action Lund

Expenditure Address*

Street Address

656 Rock Ridge Duve

Address Line 2

City

hafayette

Postal / Zip Code

20036

Purpose of Expenditure *

Training

Expenditure Amt*

\$ 150.00

Electioneering Communication*

O Yes

X No

State / Province / Region

0

Country



(1-45-108, C.R.S.)

Schedule B

| ~ | |
|---|--|
|---|--|

Full Name of Committee/Person

Gretchen Rydin

Itemized Expenditures Statement (\$20 or more)

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

Date Expended*

9/15/21

Value is required.

Recipient is (optional)

Committee

Non-Committee

Expenditure Name*

Lowes

Expenditure Address*

Street Address

5095 & Lanta Le De

Address Line 2

City

Postal / Zip Code

SUISO

Purpose of Expenditure *

Status for yourd sign

Expenditure Amt*

\$ 32.56

Electioneering Communication*

O Yes

⊗ No

State / Province / Region

CD

Country



(1-45-108, C.R.S.)

Schedule C

| Full Name of Committee/Person | |
|-------------------------------|---------------------------|
| Gretchen Rydin | |
| | |
| Loans | |
| Lender Name * | |
| (Last, First or Institution) | |
| AU | |
| Lender Address * | |
| Street Address | |
| | |
| Address Line 2 | |
| | |
| City | State / Province / Region |
| | |
| Postal / Zip Code | Country |
| | |
| Oniminal Amount of Lagra* | Interest Rate |
| 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 Bala | ance* | Date Loan Received* | |
|--------------------|---------------------------------|---------------------------------------|-------------------|
| \$ | | dd/mm/yyyy | |
| Due Date for Fina | al Payment* | | |
| dd/mm/yyyy | | / | |
| Add another loan | | | |
| Total of All Loans | * | Total Amount Repaid* | |
| \$ | | \$ | |
| List of Endor | sers or Guarantors | | |
| Loan Source | Endorser or Guarantor Full Name | Endorser or Guarantor Full Address | Amount Guaranteed |
| | | | \$ |
| Add another Endo | rser or Guarantor | | |
| Previous | | | Next |



(1-45-108, C.R.S.)

Schedule D 💙

| Full | Name | of Com | mitte | e/Person |
|------|------|--------|-------|----------|
| | | | | |

Gretchen Rydin

Returned Contributions

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

| Date Accepted | Date Returned | Amount Retu | ırned |
|---|---------------|-------------------|-------|
| NA | | \$ | |
| Name returned contribution to (Last, First) | | | |
| | | | |
| Address returned contribution to | | | |
| Street Address | | | |
| | | | |
| Address Line 2 | | | |
| | 20.41.45 | his time (Britis) | |
| City | State / P | rovince / Region | |
| Postal / Zip Code | Country | | |
| / source / / | | | |
| | | | |
| Reason contribution returned | | | |
| | | | |
| | | | |

Add another returned contribution

Returned Expenditures

9/19/21, 12:58 PM New Submission

| Type of Report* | | | |
|------------------------------|-----------------------------|-----------------------------|--|
| O Regularly Scheduled Filing | 9 | | |
| Amended Filing | | | |
| ○ Termination Report | | | |
| Report Contains Electione | ering Communications Inform | aation | |
| Reporting Period | | | |
| | From* | Through* | |
| Covered | Start Date mm/dd/yyyy | End Date mm/dd/yyyy | |
| | | | |
| Funds on Hand at the Begin | nning of Reporting Period * | | |
| (monetary only) | | | |
| \$ | | | |
| Declared Total Spending | | Total of Other Receipts * | |
| [Art. XXVIII, Sec. 4(1)] | | (Interest, Dividends, etc.) | |
| · | | • | |

\$

Non-Itemized Expenditures *

(Expenditures of \$19.99 or Less)

Non-Itemized Contributions*

(Contributions of \$19.99 or Less)

\$

Previous

Next



(1-45-108, C.R.S.)

Statement of Non-Monetary Contributions

| | Monetary Contributions & Sec. 5(3) & C.R.S. 1-45-108(1)] 1-45-108(1), C | :.R.S.] |
|-------------------------|--|------------------|
| Date Provided | Fair Market Value | Aggregate Amount |
| NA | \$ | \$ |
| Electioneering Commun | ication | |
| Yes | | lo / |
| Non-Monetary Contribut | ion Name | |
| (Last, First) | | / |
| | / | / |
| Non-Monetary Contribut | ion Address | |
| Street Address | | |
| Address Line 2 | | |
| Address Line 2 | | |
| City | State / P | rovince / Region |
| | | |
| Postal / Zip Code | Country | |
| | | |
| | | |
| Description of Non-Mon- | etary Contribution | |

9/19/21, 1:02 PM New Submission

| Contributor Employer (if applicable, mandatory) | | | |
|---|--|--|------|
| Contributor Occupation (if applicable, mandatory) | | | |
| Add another contribution | | | |
| Previous | | | Next |