

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

Received

OCT 18, 2022

| General Informat | ion | | CITY CLERK |
|------------------------------|---|-----------------------------------|------------|
| Full Name of Committee/Pe | erson* | | |
| Vote Yes for Littleton | | | |
| Committee/Person Address | s* | | |
| Street Address | | | |
| 7379 S. Oak Court | | | |
| Address Line 2 | | | |
| City | | State / Province / Region | |
| Littleton | | CO | |
| Postal / Zip Code | | Country | |
| 80127 | | USA | |
| Committee Type * | | | |
| Issue Committee | | | |
| Financial Institution Addres | ss | | |
| Street Address | | | |
| US Bank | | | |
| Address Line 2 | | | |
| 2701 Welton Street | | | |
| City | | State / Province / Region | |
| Denver | | CO | |
| Postal / Zip Code | | Country | |
| 80205 | | USA | |
| Type of Report * | | | |
| Regularly Scheduled Filing | g | | |
| Amended Filing | | | |
| Termination Report | | | |
| Report Contains Electione | eering Communications Infor | mation | |
| Reporting Period | | | |
| | From * | Through * | |
| Covered | Start Date mm/dd/yyyy 9/23/022 | End Date mm/dd/yyyy 10/13/2022 | |
| Funds on Hand at the Begin | nning of Reporting Period ³ | * | |
| (monetary only) | 0 · · · · · · · · · · · · · · · · · · · | | |
| \$ 4,371.90 | | | |
| · · · | | | |
| | | | |
| | | | |

Declared Total Spending

[Art. XXVIII, Sec. 4(1)] \$ 977.94

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)

\$ 17.70

Schedule A

Full Name of Committee/Person

Vote Yes for Littleton

Itemized Contributions Statement (\$20 or more)

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

| Date Accepted * | Contribution Amt. * | Aggregate Amt. * | |
|--|---------------------|-------------------|--|
| 09/23/2022 | \$ 50.00 | \$ 50.00 | |
| | φ 00.00 | φ 55.00 | |
| Electioneering Communication* | | | |
| O Yes | ۲ | No | |
| Contributor Name * | | | |
| (Last, First) | | | |
| BARR, STEVE | | | |
| Contributor Address* | | | |
| Street Address | | | |
| 1608 W CANAL COURT | | | |
| Address Line 2 | | | |
| City | | Province / Region | |
| LITTLETON | CO | | |
| Postal / Zip Code | Countr | У | |
| 80120 | USA | | |
| Contribution Description * | | | |
| CREDIT CARD | | | |
| Contributor Employer | | | |
| (if applicable, mandatory) | | | |
| | | | |
| Contributor Occupation | | | |
| (if applicable, mandatory) | | | |
| Date Accepted * | Contribution Amt. * | Aggregate Amt. * | |
| 9/23/2022 | \$ 50.00 | \$ 50.00 | |
| Electioneering Communication * | | | |
| ○ Yes | ۲ | No | |
| Contributor Name * | | | |
| (Last, First) | | | |
| NALLY, DANIEL | | | |
| Contributor Address* | | | |
| Street Address | | | |
| 5810 SOUTH HICKORTY STREET | | | |
| | | | |
| Address Line 2 | | Dravince / Derien | |
| | State / | Province / Region | |
| City | State / CO | Province / Region | |
| Address Line 2 City LITTLETON Postal / Zip Code | | | |

| Contribution Description * | | | |
|--|---------------------------------------|--|--|
| CREDIT CARD | | | |
| Contributor Employer | | | |
| (if applicable, mandatory) | | | |
| Contributor Occupation | | | |
| (if applicable, mandatory) | | | |
| Date Accepted * | Contribution Amt.* | Aggregate Amt. * | |
| 09/23/2022 | \$ 50.00 | \$ 50.00 | |
| Electioneering Communication | * | | |
|) Yes | | No | |
| Contributor Name * | | | |
| (Last, First) | | | |
| REYNOLDS, JASON | | | |
| Contributor Address * | | | |
| Street Address | | | |
| 5378 S LOUTHAN STREET | | | |
| Address Line 2 | | | |
| City | | State / Province / Region | |
| | | CO | |
| LITTLETON | | | |
| LITTLETON Postal / Zip Code 80120 Contribution Description * CREDIT CARD | | Country USA | |
| Postal / Zip Code 80120 Contribution Description * | | Country | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) | | Country | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) Contributor Occupation | Contribution Amt.* | Country USA | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) Contributor Occupation (if applicable, mandatory) | | Country USA | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) Contributor Occupation (if applicable, mandatory) Date Accepted * | Contribution Amt.* \$ 50.00 | Country USA Aggregate Amt.* | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) Contributor Occupation (if applicable, mandatory) Date Accepted * 09/24/2022 | Contribution Amt.* \$ 50.00 | Country USA Aggregate Amt.* | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) Contributor Occupation (if applicable, mandatory) Date Accepted * 09/24/2022 Electioneering Communication | Contribution Amt.* \$ 50.00 | Country USA Aggregate Amt.* \$ 50.00 | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) Contributor Occupation (if applicable, mandatory) Date Accepted * 09/24/2022 Electioneering Communication (Yes | Contribution Amt.* \$ 50.00 | Country USA Aggregate Amt.* \$ 50.00 | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) Contributor Occupation (if applicable, mandatory) Date Accepted * 09/24/2022 Electioneering Communication O Yes Contributor Name * | Contribution Amt.* \$ 50.00 | Country USA Aggregate Amt.* \$ 50.00 | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) Contributor Occupation (if applicable, mandatory) Date Accepted * 09/24/2022 Electioneering Communication (Yes Contributor Name * (Last, First) | Contribution Amt.* \$ 50.00 | Country USA Aggregate Amt.* \$ 50.00 | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) Contributor Occupation (if applicable, mandatory) Date Accepted * 09/24/2022 Electioneering Communication O Yes Contributor Name * (Last, First) MOREAN, CHRIS Contributor Address * Street Address | Contribution Amt.* \$ 50.00 | Country USA Aggregate Amt.* \$ 50.00 | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) Contributor Occupation (if applicable, mandatory) Date Accepted * 09/24/2022 Electioneering Communication () Yes Contributor Name * (Last, First) MOREAN, CHRIS Contributor Address * Street Address 5860 S HICKORY STREET | Contribution Amt.* \$ 50.00 | Country USA Aggregate Amt.* \$ 50.00 | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) Contributor Occupation (if applicable, mandatory) Date Accepted * 09/24/2022 Electioneering Communication () Yes Contributor Name * (Last, First) MOREAN, CHRIS Contributor Address * Street Address 5860 S HICKORY STREET Address Line 2 | Contribution Amt.* \$ 50.00 | Country USA Aggregate Amt.* \$ 50.00 No | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) Contributor Occupation (if applicable, mandatory) Date Accepted * 09/24/2022 Electioneering Communication () Yes Contributor Name * (Last, First) MOREAN, CHRIS Contributor Address * Street Address 5860 S HICKORY STREET Address Line 2 City | Contribution Amt.* \$ 50.00 | Country USA Aggregate Amt.* \$ 50.00 No State / Province / Region | |
| Postal / Zip Code 80120 Contribution Description * CREDIT CARD Contributor Employer (if applicable, mandatory) Contributor Occupation (if applicable, mandatory) Date Accepted * 09/24/2022 Electioneering Communication () Yes Contributor Name * (Last, First) MOREAN, CHRIS Contributor Address * Street Address 5860 S HICKORY STREET Address Line 2 | Contribution Amt.* \$ 50.00 | Country USA Aggregate Amt.* \$ 50.00 No | |

Contribution Description *

CREDIT CARD

Contributor Employer

(if applicable, mandatory)

Contributor Occupation

(if applicable, mandatory)

| Date Accepted * | Contribution Amt.* | Aggregate Amt. * | |
|---|---|-----------------------------|--|
| 09/25/2022 | \$ 50.00 | \$ 50.00 | |
| Election communication * | | | |
| Electioneering Communication* | | | |
| O Yes | No | | |
| Contributor Name * | | | |
| (Last, First) | | | |
| PARMENTIER, PAULA | | | |
| Contributor Address* | | | |
| Street Address | | | |
| 485 S LOGAN STREET | | | |
| Address Line 2 | | | |
| City | State / Province / | Region | |
| DENVER | CO | | |
| Postal / Zip Code | Country | | |
| 80209 | USA | | |
| Contribution Description * | | | |
| CREDIT CARD | | | |
| Contributor Employer | | | |
| Contributor Employer | | | |
| (if applicable, mandatory) | | | |
| (if applicable, mandatory) | | | |
| (if applicable, mandatory) | | | |
| | | | |
| Contributor Occupation | Contribution Amt.* | Aggregate Amt. * | |
| Contributor Occupation (if applicable, mandatory) | Contribution Amt. * \$ 40.00 | Aggregate Amt.* \$ 40.00 | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 | | | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 Electioneering Communication * | \$ 40.00 | | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 Electioneering Communication * O Yes | | | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 Electioneering Communication * | \$ 40.00 | | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 Electioneering Communication * O Yes Contributor Name * (Last, First) | \$ 40.00 | | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 Electioneering Communication * O Yes Contributor Name * | \$ 40.00 | | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 Electioneering Communication * O Yes Contributor Name * (Last, First) | \$ 40.00 | | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 Electioneering Communication * • Yes Contributor Name * (Last, First) SANTANA, PATRICK | \$ 40.00 | | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 Electioneering Communication * O Yes Contributor Name * (Last, First) SANTANA, PATRICK Contributor Address * Street Address 2307 W CALEY PLACE | \$ 40.00 | | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 Electioneering Communication * • Yes Contributor Name * (Last, First) SANTANA, PATRICK Contributor Address * Street Address 2307 W CALEY PLACE Address Line 2 | \$ 40.00 No | \$ 40.00 | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 Electioneering Communication * O Yes Contributor Name * (Last, First) SANTANA, PATRICK Contributor Address * Street Address 2307 W CALEY PLACE Address Line 2 City | \$ 40.00 No State / Province / | \$ 40.00 | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 Electioneering Communication * O Yes Contributor Name * (Last, First) SANTANA, PATRICK Contributor Address * Street Address 2307 W CALEY PLACE Address Line 2 City LITTLETON | \$ 40.00 No State / Province / CO | \$ 40.00 | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 Electioneering Communication * • Yes Contributor Name * (Last, First) SANTANA, PATRICK Contributor Address * Street Address Street Address 2307 W CALEY PLACE Address Line 2 City LITLETON Postal / Zip Code | \$ 40.00 No State / Province / CO Country | \$ 40.00 | |
| Contributor Occupation (if applicable, mandatory) Date Accepted * 09/25/2022 Electioneering Communication * O Yes Contributor Name * (Last, First) SANTANA, PATRICK Contributor Address * Street Address 2307 W CALEY PLACE Address Line 2 City LITTLETON | \$ 40.00 No State / Province / CO | \$ 40.00 | |

Contribution Description *

CREDIT CARD

Contributor Employer

(if applicable, mandatory)

Contributor Occupation

(if applicable, mandatory)

| (| | |
|-------------------------------|---------------------------------|------------------------------|
| Date Accepted * 10/03/2022 | Contribution Amt.* \$ 100.00 | Aggregate Amt.* \$ 100.00 |
| | φ 100.00 | \$ 100.00 |
| Electioneering Communication* | | |
| ○ Yes | No | |
| Contributor Name * | | |
| (Last, First) | | |
| HATHAWAY, CINDY | | |
| Contributor Address* | | |
| Street Address | | |
| 7785 W GLASGOW PLACE | | |
| Address Line 2 | | |
| City | State / Province / | Region |
| LITTLETON | CO | |
| Postal / Zip Code | Country | |
| 80128 | USA | |
| Contribution Description * | | |
| CREDIT CARD | | |
| Contributor Employer | | |
| (if applicable, mandatory) | | |
| WESTERN WELCOME WEEK | | |
| | | |
| Contributor Occupation | | |
| (if applicable, mandatory) | | |
| EXECUTIVE DIRECTOR | | |
| Date Accepted * | Contribution Amt. * | Aggregate Amt. * |
| 10/02/2022 | \$ 75.00 | \$ 75.00 |
| Electioneering Communication* | | |
| Yes | No | |
| | · · · | |
| Contributor Name* | | |
| (Last, First) | | |
| RYDIN, GRETCHEN | | |

| Contributor Address * Street Address 5904 S DATURA STREET | | | | |
|---|--------------------------------|--|------------------------------|--|
| Address Line 2 City LITTLETON Postal / Zip Code 80120 | | State / Province / R CO Country USA | egion | |
| Contribution Description * CHECK | | | | |
| Contributor Employer (if applicable, mandatory) | | | | |
| Contributor Occupation (if applicable, mandatory) | | | | |
| Date Accepted * 10/02/2022 | Contribution Amt. \$ 75.00 | * | Aggregate Amt.* \$ 150.00 | |
| Electioneering Communication * | | No | | |
| Contributor Name* (Last, First) RYDIN, GRETCHEN | | | | |
| Contributor Address * Street Address 5904 DATURA STREET Address Line 2 | | | | |
| City | | State / Province / R | legion | |
| LITTLETON | | CO | | |
| Postal / Zip Code 80120 | | Country USA | | |
| Contribution Description * CHECK | | | | |
| Contributor Employer (if applicable, mandatory) | | | | |
| Contributor Occupation (if applicable, mandatory) | | | | |
| Date Accepted * 10/02/2022 | Contribution Amt. \$ 200.00 | * | Aggregate Amt.* \$ 200.00 | |
| Electioneering Communication* | | No | | |
| Contributor Name * (Last, First) CHAN, KELLI | | | | |

| Contributor Address* | | | | |
|--|-------------------|----------------------|------------------|--|
| Street Address | | | | |
| 762 WINDMILL PLACE Address Line 2 | | | | |
| City | | State / Province / R | Region | |
| HIGHLANDS RANCH | | CO | | |
| Postal / Zip Code | | Country | | |
| 80126 | | USA | | |
| Contribution Description * CHECK | | | | |
| Contributor Employer | | | | |
| (if applicable, mandatory) | | | | |
| NONE | | | | |
| Contributor Occupation | | | | |
| (if applicable, mandatory) | | | | |
| NONE | | | | |
| Date Accepted * | Contribution Amt. | * | Aggregate Amt. * | |
| 10/02/2022 | \$ 50.00 | | \$ 50.00 | |
| Electioneering Communication* | | | | |
| ○ Yes | | No | | |
| Contributor Name * | | | | |
| (Last, First) | | | | |
| KATES, DAVID | | | | |
| Contributor Address* | | | | |
| Street Address | | | | |
| 6905 S SYCAMORE STREET Address Line 2 | | | | |
| City | | State / Province / R | Region | |
| LITTLETON | | СО | | |
| Postal / Zip Code | | Country | | |
| 80120 | | USA | | |
| Contribution Description * | | | | |
| CASH | | | | |
| Contributor Employer | | | | |
| (if applicable, mandatory) | | | | |
| Contributor Occupation | | | | |
| (if applicable, mandatory) | | | | |
| Date Accepted * | Contribution Amt. | * | Aggregate Amt. * | |
| 10/02/2022 | \$ 100.00 | | \$ 100.00 | |
| Electioneering Communication* | | | | |
| ◯ Yes | | No | | |
| | | | | |

Contributor Name*

(Last, First) WEED, MICHAEL

Contributor Address*

Street Address 5895 S LAKEVIEW STREET

Address Line 2

City LITTLETON Postal / Zip Code 80120 State / Province / Region CO Country USA

Contribution Description*

CHECK

Contributor Employer

(if applicable, mandatory)

SPAUN IDEAS

Contributor Occupation

(if applicable, mandatory)

Schedule B

Full Name of Committee/Person

Vote Yes for Littleton

Itemized Expenditures Statement (\$20 or more)

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

Expenditure Address*

| State / Province / Region |
|---------------------------|
| СО |
| Country |
| USA |
| |

Purpose of Expenditure *

SIGN PRINTING

Collection

{"repeatAction":"Add another expenditure","deleteAction":"Delete","repeatableRowsType":1,"rowMinAdd":0,"rowMaxAdd":0}

Schedule C

Full Name of Committee/Person

Vote Yes for Littleton

| Loans | | | | |
|------------------------------|------------------------------------|-------|-----------------------------------|-------------------|
| Lender Name | | | | |
| (Last, First or Institution) | | | | |
| Lender Address | | | | |
| Street Address | | | | |
| Address Line 2 | | | | |
| City | | State | e / Province / Region | |
| Postal / Zip Code | | Cou | ntry | |
| Original Amount of L | oan | | Interest Rate | |
| \$ | | | | |
| Loan Amount Receiv | red | | Principal Amount Paid | |
| This Reporting Period | | | This Reporting Period | |
| \$ | | | \$ | |
| Interest Amount Paid | 1 | | Total Repayments Made | |
| This Reporting Period | | | \$ | |
| \$ | | | | |
| Outstanding Balance |) | | Date Loan Received | |
| \$ | | | mm/dd/yyyy | |
| Due Date for Final Pa | ayment | | | |
| mm/dd/yyyy | - | | | |
| | | | | |
| Total of All Loans | | | Total of all Loans Amount R | Repaid |
| \$ | | | \$ | |
| List of Endorse | rs or Guarantors | | | |
| Loan Source | Endorser or Guarantor Full Name | | dorser or Guarantor Full dress | Amount Guaranteed |
| | | | | \$ |
| | | | | Ψ |

Schedule D

Full Name of Committee/Person

Vote Yes for Littleton

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 / R | legion |
| Postal / Zip Code | | Country | |
| Reason contribution returned | | | |
| Returned Expenditures (Previously reported on Schedule B - Expen | ditures returned or refunded | d to the committee) | |
| Date Expended mm/dd/yyyy | Date Returned mm/dd/yyyy | | Amount Returned \$ |
| Name returned expenditure to (Last, First) | | | * |
| Address returned expenditure to Street Address | | | |
| Address Line 2 City | | State / Province / R | legion |
| Postal / Zip Code | | Country | - |
| Reason expenditure returned | | | |

| Full Name of Committee Vote Yes for Littleton | /Person | |
|--|---|---|
| | -Monetary Contributions & Sec. 5(3) & C.R.S. 1-45-108(1)] 1-45-108(1), C.I | R.S.] |
| Date Provided | Fair Market Value | Aggregate Amount |
| mm/dd/yyyy | \$ | \$ |
| Electioneering Commun | lication | |
| Yes | | 10 |
| Non-Monetary Contribut | tion Name | |
| Non-Monetary Contribut Street Address Address Line 2 | tion Address | |
| City | State / F | Province / Region |
| Postal / Zip Code | Country | |
| Description of Non-Mon | etary Contribution | |
| Employer | | |
| (if applicable, mandatory) | | |
| Occupation | | |
| (if applicable, mandatory) | | |
| Coordinated with a Can | didate/Candidate Committee or Polition | cal Party |
| | d by or coordinated with a candidate or candidate's | titure on Detailed Summary. Art. XXVIII, Sec. 2(9) states: " s agent are deemed to be both contributions by the maker of the |
| | | |

Contributions and Expenditures Detailed Summary

Full Name of Committee/Person

Vote Yes for Littleton

Reporting Period

| Cov | er | ed | |
|-----|----|----|--|

9/23/022

From

Through 10/13/2022

\$ 0.00

\$ 0.00

Contributions

Beginning reporting period funds on hand

Provided on General Information

\$ 4,371.90

Total Itemized Contributions (\$20 or more)

Provided on Schedule A

\$ 890.00

Loans Received

Provided on Schedule C \$ 0.00

\$ 0.00

Returned Expenditures

Provided on Schedule D

\$ 0.00

Total Monetary Contributions

Sum of above

\$ 890.00

Expenditures

Itemized Expenditures (\$20 or more)

Provided on Schedule B

\$ 960.24

Loan Repayments Made

Provided on Schedule C

\$ 0.00

Total Monetary Expenditures

Sum of above Expenditures

\$ 977.94

Total Coordinated Non-Monetary Expenditures

(Candidate/Candidate Committee & Political Parties ONLY)

\$ 0.00

Total Spending

Total Monetary Expenditures + Total Coordinated Non-Monetary Expenditures

\$ 977.94

Total of Non-Itemized Expenditures

Total Non-Itemized Contributions

Provided on General Information

Total of Other Receipts

Provided on General Information

Provided on General Information

\$ 17.70

Returned Contributions (To donor)

Provided on Schedule D

\$ 0.00

Authorization

Full Name of Committee/Person

Vote Yes for Littleton

Funds on Hand at the Beginning of Reporting Period

(monetary only) \$ 4,371.90

Total of Monetary Contributions & Beginning Amount

(sum of above) \$ 5,261.90

Total Monetary Expenditures

From Detailed Summary Page

\$ 977.94

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

Total of Monetary Contributions & Beginning Amount minus Total Monetary Expenditures

\$ 4,283.96

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*

DARRELL SCHULTE

Registered Agent's Signature*

DARRELL SCHULTE

Candidates Name*

Candidates Signature *

NOT APPLICABLE

Total Monetary Contributions

From Detailed Summary Page \$ 890.00