## REPORT OF CONTRIBUTIONS AND EXPENDITURES

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


SOS ID NUMBER (state and county committees): $\square$

## Type of Report

Regularly Scheduled Filing.

$\square$
Amended Filing. This amends previous report filed on (date) Submit changes or new information ONLY

$\square$Termination Report. (Termination Reports MUST Have a Monetary Balance of Zero in Line 5)
Check this box if this Report Contains Electioneering Communications Information

$\square$Termination Report. (Termination Reports MUST Have a Monetary Balance of Zero in Line 5)
Check this box if this Report Contains Electioneering Communications Information

$\square$

| Totals Detailed Summary Page |  |
| :---: | :---: |
| $\$$ | $2,159.40$ |
| $\$$ | -0.10 |
| $\$$ | $2,159.40$ |
| $\$$ | 460.00 |
| $\$$ | $1,699.40$ |

The appropriate officer shall impose a penalty of $\mathbf{\$ 5 0}$ per day for each day that a report is filed late.
[Art. XXVIII Sec. 10(2)(a)]
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.
Print Registered Agent's Name:


Registered Agent's Signature:
Print Candidate Name:
 Date: $10 / 28 / 2023$ Candidates Signature: Date:



Current Reporting Period:
$10 / 13 / 2023$


| Funds on hand at the beginning of reporting period (Monetary Only) |  | \$ | 159.40 |
| :---: | :---: | :---: | :---: |
| 6 | Itemized Contributions $\mathbf{\$ 2 0}$ or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule " A ") | \$ | $-0-$ |
| 7 | Total of Non-Itemized Contributions (Contributions of $\$ 19.99$ and Less) | \$ | - 0 - |
| 8 | Loans Received (Please list on Schedule "C") | \$ | - 0 - |
| 9 | Total of Other Receipts (Interest, Dividends, etc.) | \$ | $-\mathrm{O}-$ |
| 10 | Returned Expenditures (from recipient) (Please list on Schedule "D") | \$ | $\square 0-$ |
| 11 | Total Monetary Contributions (Total of lines 6 through 10) | \$ | $\square 0-$ |
| 12 | Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions) | \$ | $\longrightarrow 0-$ |
| 13 | Total Contributions <br> (Line $11+$ line 12) | \$ | $-0=$ |
| 14 | Itemized Expenditures $\mathbf{\$ 2 0}$ or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B") | \$ | 460.00 |
| 15 | Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less) | \$ | - 0 - |
| 16 | Loan Repayments Made (Please list on Schedule "C") | \$ | $-0-$ |
| 17 | Returned Contributions (To donor) (Please list on Schedule "D") | \$ | -0- |
| 18 | Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee \& Political Parties only) | \$ | $-0-$ |
| 19 | Total Monetary Expenditures <br> (Total of lines 14 through 17) | \$ | $460.00$ |
| 20 | Total Spending <br> (Line 18 + line 19) | \$ | $460.00$ |

## Full Name of Committec/Person: THM LONGEOO NORTHGLENNMAYOR CAMPAIGNCOMMIIIEE

WARNING: Please read the instruction page for Schedule "A" before completing!

## PLEASE PRINT/TYPE

| 1. Date Accepted |
| :--- |
| 2. Contribution Amt. <br> $\$$ |
| 3. Aggregate Amt. * <br> $\$$ |
| $\square$ Check box if <br> Electioneering <br> Communication |

4. Name (Last, First): $\qquad$
5. Address: $\qquad$
6. City/State/Zip: $\qquad$
7. Description: $\qquad$
8. Employer (if applicable, mandatory): $\qquad$
9. Occupation (if applicable, mandatory): $\qquad$

| 1. Date Accepted |
| :--- |
| 2. Contribution Amt. <br> $\$$ |
| 3. Aggregate Amt. <br> \$ |
| $\square$ Check box if <br> Electioneering <br> Communication |

4. Name (Last, First):
5. Address: $\qquad$
6. City/State/Zip: $\qquad$
7. Description: $\qquad$
8. Employer (if applicable, mandatory): $\qquad$
9. Occupation (if applicable, mandatory): $\qquad$
10. Date Accepted
11. Name (Last, First): $\qquad$
12. Contribution Amt.
\$
13. Aggregate Amt. *
\$
$\square$ Check box if Electioneering Communication
14. Address: $\qquad$
15. City/State/Zip: $\qquad$
16. Description: $\qquad$
17. Employer (if applicable, mandatory): $\qquad$
18. Occupation (if applicable, mandatory): $\qquad$

| 1. Date Accepted | 4. Name (Last, First): |
| :--- | :--- |
| 2. Contribution Amt. <br> $\$$ | 5. Address: <br> 6. City/State/Zip: <br> 3. Aggregate Amt. * <br> $\$$ |
| 7. Description:,  <br> $\square$ Check box if <br> Electioneering <br> Communication 8. Employer (if applicable, mandatory): | 9. Occupation (if applicable, mandatory): |

[^0]|  | Schedule B - Itemized Expenditures Statement (\$20 or more) [1-45-108(1)(a), C.R.S.] |
| :---: | :---: |
| Full Name of Committee/Person: TM LONGFOr NGRTHLLENNMAYOR CAMPAIGN COMMUTIEE PLEASE PRINT/TYPE |  |
| 1. Date Expended $10.18 .2023$ | 4. Name: COLORADO COMMUNLTYMEDIA |
| $\begin{aligned} & \text { 2. Amount } \\ & \$ 460.00 \end{aligned}$ | 5. Address: 750 W.HAMPDEN AVE., STE. 225 |
| 3.Recipient is (optional): Committee Non-Committee | 7. Purpose of Expendiure: COMMUNTIT NEWSPADER AD $\square$ Check box if Electioneering Communication |
| 1. Date Expended | 4. Name: |
| 2. Amount | 5. Address: |
| \$ | 6. City/State/Zip: |
| 3.Recipient is (optional): Committee | 7. Purpose of Expenditure: |
| $\square$ Non-Committee | $\square$ Check box if Electioneering Communication |
| 1. Date Expended | 4. Name: |
| 2. Amount | 5. Address: |
| \$ | 6. City/State/Zip: |
| 3.Recipient is (optional): |  |
| $\square$ Committee | 7. Purpose of Expenditure: |
| $\square$ Non-Committee | $\square$ Check box if Electioneering Communication |
| 1. Date Expended | 4. Name: |
| 2. Amount | 5. Address: |
| \$ | 6. City/State/Zip: |
| 3.Recipient is (optiona): |  |
| $\square$ Committee | 7. Purpose of Expenditure: |
| $\square$ Non-Committee | $\square$ Check box if Electioneering Communication |
| 1. Date Expended ${ }^{\text {a }}$ ( ${ }^{\text {a }}$ Name: |  |
| 2. Amount | 4. Name: <br> 5. Address: |
| \$ | 6. City/State/Zip: |
| 3.Recipient is (optional): |  |
| $\square$ Committee | 7. Purpose of Expenditure: |
| $\square$ Non-Committee | $\square$ Check box if Electioneering Communication |

# Full Name of Committee/Person: TMM LONG for Northe LBNN CAMPAlGN CoumitTEF 

## LOANS - Loans Owed by the Committce

(Use a separate schedule for each loan. This form is for line item 8 and 16 of the Detailed Summary Report.)
[No information copied from such reports shall be sold or used by any person for the purpose of soliciting contributions or for any commercial purpose. [Art. XXVIII, Scc. $9($ () $)$ ] Notwithstanding any other section of this article to the contrary, a candidate's candidate committee may receive a lom from a financial institution organized under state or federal law if the loan bears the usual and customary interest rate, is made on a basis that assures repayment, is evidenced by a written instrument, and is subject to a due date or amortization schedule [Art. XXVIII, Sec. 3(8)]

## LOAN SOURCE

Name (Last, First or Institution): $\qquad$
Address: $\qquad$
City/State/Zip: $\qquad$
Original Amount of Loan: \$ $\qquad$ Interest Rate: $\qquad$

## Loan Amount Received This Reporting Period: \$

$\qquad$
Total of All Loans This Reporting
Period: \$
(Place on line 8 of Detailed Summary Report)
Principal Amount Paid This Reporting Period: \$ $\qquad$
Interest Amount Paid This Reporting Period: $\$$ $\qquad$
Amount Repaid This Reporting Period: $\$$ (Amount Repaid is sum of Principal \& Interest entered on Detail Summary)

Total Repayments Made: \$
(Sum of Schedule C pages, Place on line 16 of Detailed Summary)

Outstanding Balance: $\qquad$

TERMS OF LOAN:
Date Loan Received
Due Date for Final Payment

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

| Full Name | Address, City, State, Zip | Amount Guaranteed |
| :---: | :---: | :---: |
|  |  |  |
|  |  |  |
|  |  |  |

## Schedule D - Returned Contributions \& Expenditures

## 

## Returned Contributions

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

PLEASE PRINT/TYPE


## Returned Expenditures

(Previously reported on Schedule B-Expenditures returned or refunded to the committee)
PLEASE PRINT/TYPE

| 1. Date Expended | 4. Name (Last. First): |
| :--- | :--- |
| 2. Date Returned | 5. Address: |
| 3. Amount | 6. City/State/Zip: |
| $\$$ 7. Comment (Optional): |  |


| 1. Date Expended | 4. Name (Last. First): |
| :--- | :--- |
| 2. Date Returned | 5. Address: |
| 3. Amount | 6. City/State/Zip: |
| $\$$ | 7. Comment (Optional): |

## Full Name of Committee/Person: TEMLONE for NoRTHGLENN MAYOR CAMPARAN Gmunuris

PLEASE PRINT/TYPE


| 1. Date Provided |
| :--- |
| 2. Fair Market Value |
| $\$$ |
| 3. Aggregate Amt. <br> $\$$ |
| $\square$ Check box if <br> Electioneering <br> Communication |

4. Name (Last. First):
5. Address:
6. City/State/Zip:
7. Description:
8. Employer (if applicable. mandatory):
9. Occupation (if applicable. mandatory):
10. $\square$ Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

| 1. Date Provided |
| :--- |
| 2. Fair Market Value |
| $\$$ |
| 3. Aggregate Amt. <br> $\$$ |
| $\square$ Check box if <br> Electioneering <br> Communication |

4. Name (Last. First): $\qquad$
5. Address: $\qquad$
6. City/State/Zip: $\qquad$
7. Description: $\qquad$
8. Employer (if applicable. mandatory): $\qquad$
9. Occupation (if applicable. mandatory): $\qquad$
10 $\qquad$ Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *
[^1]
[^0]:    * For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, See. 3(3); Political Committee Art. XXVIII, See 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

[^1]:    * Note: 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."

