Colorado Secretary of State Elections Division 1700 Broadway, Ste. 200 Denver, CO 80290

Ph: (303) 894-2200 ext. 6383 Fax: (303) 869-4861 Email: cpfhelp@sos.state.co.us

www.sos.state.co.us



### **REPORT OF CONTRIBUTIONS AND EXPENDITURES** (1-45-108, C.R.S.)

	(1-45-100, C.R.S.)		1 1 1 12 12 12 12 12 12 12 12 12 12 12 12 12 1
Full Name of Committee/Person:	COMMITTEE TO ELECT	JOH	
111 66 111 6	As Shown On Registration		
Address of Committee/Person:	1357 to Avenue, UN	176	2
City, State & Zip Code:	1357 +3 AVENUE, UN CREELEY, CO FOLSA		
Committee Type:	MUNICIPAL		
Name and Address of Financial Institution	FMS BANK, 2425 35 A	٧ċ.,	CREELEY, Co
SOS ID NUMBER	(state and county committees):		
Type of Report			
Regularly Scheduled Filing	<b>y</b> .		
Amended Filing. This amend Submit changes or new informati			
	nation Reports MUST Have a Monetary Balance of	7ero in	Line 5)
Check this box if this Report	rt Contains Electioneering Communication	ns Info	rmation
Reporting Period Covered:	10-27-2022 Throug		10-17-2023
Reporting Period Covered:	Date	g11	Date
Declared Total Spending (if app [Art. XXVIII, Sec. 4(1)]			
[1111 1111 111, 0001 1(1)]			
			otals Detailed Summary Page
	of Reporting Period (monetary only)	\$	3,909.05
2 Total Monetary Contributions (lin		\$	9,550.00
	& Beginning Amount (line 1 + line 2)	\$	13,459.05
4 Total Monetary Expenditures (lin		\$	9,016.22
5 Funds on Hand at the End of Rep	porting Period (monetary) (line 3 – line 4)	\$	9,442.83
The appropriate officer sh	hall impose a penalty of \$50 per day for each [Art. XXVIII Sec. 10(2)(a)]	h day tl	nat a report is filed late.
Authorization (Must be completed b	by either the Registered Agent OR the Candidate):	I hereb	v certify and declare. under
	ny knowledge or belief all contributions receiv		
	in the form of membership dues transferred by		
permissible sources.			1 0 - 7
Duint Danistanad Agant's Name			
Registered Agent's Signature:			Date:
Print Candidate Name:	1N O. GATES		
Print Candidate Name: Candidates Signature:	_D.X		Date: 10-13-23
( )		Co	olorado Secretary of State Form Rev. 12/09

#### **DETAILED SUMMARY**

Full Name of Committee/Person:

COMMITTEE TO ELECT JOHN CATES

Current Reporting Period: / 0

10-27-2022

Through

10-17-2023

Fund	s on hand at the beginning of reporting period (Monetary Only)	\$ 3,909.05
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 9,550.00
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.)	\$ -0-
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ -0-
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 9,550.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ _ 0-
13	Total Contributions (Line 11 + line 12)	\$ 9,550.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 4,016.22
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 (Total of lines 14 through 17)	\$ 4,016.22
20	Total Spending (Line 18 + line 19)	\$ 4,016.22

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

Full Name of Committee/Person: Committee To ELECT JOHN GATES

PLEASE PRINT/	TYPE
1. Date Accepted	4. Name (Last, First): Jun DELIA HAEFELI
3-16-23	
2. Contribution Amt.	5. Address: 1446 43 AVENUE
\$ 100.00	6. City/State/Zip: GREELEY, Co Fol34
3. Aggregate Amt. *	7. Description: CASH DOWATON
•	8. Employer (if applicable, mandatory):
Check box if	D 4-4
Electioneering Communication	9. Occupation (if applicable, mandatory):
1. Date Accepted	4. Name (Last, First): NINA JOHN GUTTERREZ
7-16-23  2. Contribution Amt.	5. Address: 617 63 NENVE
\$ 500-00	6. City/State/Zip: CNEECEY, Co Pu634
3. Aggregate Amt. *	7. Description: CASH DONA DON
\$	M A
Check box if	8. Employer (if applicable, mandatory):
Electioneering	9. Occupation (if applicable, mandatory): CAR. D. CONCRETE
Communication	
1. Date Accepted	4. Name (Last, First): MIKE LORI SHOOP
3-17-28	4. Name (Last, First):
2. Contribution Amt.	5. Address: 6600 W. 20 31, # 71
\$ 250.00	5. Address: 6600 W. 20 ST, # 47 6. City/State/Zip: 6000 CO 80634
3. Aggregate Amt. *	7. Description: CASH DUNATION
Ψ	8. Employer (if applicable, mandatory):
Check box if	D-5 A -A
Electioneering Communication	9. Occupation (if applicable, mandatory):
1. <u>Date Accepted</u> 3-17-23	4. Name (Last, First): MIKE JILL TROTTER
2. Contribution Amt.	5. Address: 1757 40 AVENVE
\$ 500.00	6. City/State/Zip: CREELEY, Co 80634
3. Aggregate Amt. *	Care A Care I
\$	1.4.4.5
Check box if	CA Day 4 = Day 4
Electioneering	9. Occupation (if applicable, mandatory): FRONT IZANGE 12004, NG
Communication	1

<sup>\*</sup> 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, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

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

Full Name of Committee/Person: \_\_\_\_

COMMITTEE TO ELECT JOHN GATES

PLEASE PRINT/	TYPE
1. Date Accepted	4. Name (Last, First): STEVE BAKEA
3-17-23	5. Address: 3736 W. 16 ST LW
2. Contribution Amt.	5. Address:
\$ 100.00	6. City/State/Zip: GREELEY, Co 80134
3. Aggregate Amt. *	7. Description: CASH DONA TON
<b>D</b>	8. Employer (if applicable, mandatory):
Check box if	Para Day Senade
Electioneering Communication	9. Occupation (if applicable, mandatory): JEARS ICEAL ESTATE
1. Date Accepted	4. Name (Last, First): PHYLLIS / LARRY FATON  5. Address: 1904 26 AVENUE
3-17-23	5 Address 1904 26 AVENUE
2. Contribution Amt. \$ 750.00	S. Address: C. Parzd
	6. City/State/Zip: GREELEY, Co 80634
3. Aggregate Amt. *	7. Description: Cash Donahou
Check how if	8. Employer (if applicable, mandatory):
Check box if Electioneering	9. Occupation (if applicable, mandatory): ReTルざ
Communication	
1. Date Accepted	4. Name (Last, First): CHUCK DICKSON
3-18-23	4. Name (Last, First):
2. Contribution Amt.	5. Address: 4505 W. 14 STREET
\$ Inv na	CASELOW CO 80634
\$ (OU.00	6. City/State/Zip:
3. Aggregate Amt. *	6. City/State/Zip: CREELEY, Co 80634 7. Description: CASH DONARON
100.00	7. Description: CASH DONARON
3. Aggregate Amt. * \$ Check box if	7. Description:
3. Aggregate Amt. *	7. Description:
3. Aggregate Amt. * \$ Check box if Electioneering Communication	7. Description:
3. Aggregate Amt. * \$ Check box if Electioneering Communication  1. Date Accepted	7. Description:
3. Aggregate Amt. * \$ Check box if Electioneering Communication  1. Date Accepted 3-18-23	7. Description:
3. Aggregate Amt. * \$ Check box if Electioneering Communication  1. Date Accepted	7. Description:
3. Aggregate Amt. * \$  Check box if Electioneering Communication  1. Date Accepted 3-18-23 2. Contribution Amt. \$  1. Od. 11 3. Aggregate Amt. *	7. Description:
3. Aggregate Amt. * \$  Check box if Electioneering Communication  1. Date Accepted 3-18-23  2. Contribution Amt. \$  100.01	7. Description:
3. Aggregate Amt. * \$  Check box if Electioneering Communication  1. Date Accepted 3-18-23  2. Contribution Amt. \$  1. Aggregate Amt. * \$  Check box if	7. Description:
3. Aggregate Amt. * \$  Check box if Electioneering Communication  1. Date Accepted 3-18-23  2. Contribution Amt. \$	7. Description:

<sup>\*</sup> 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, Sec. 3(3); Political Committee Art. XXVIII, Sec. 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

### $Schedule \ A-Itemized \ Contributions \ Statement \ (\$20 \ or \ more)$

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

Full Name of Committee/Person: COMMITTEE TO ELECT JOHN GATES

PLEASE PRINT/	
1. Date Accepted	4. Name (Last, First): DICK MONFORT
3-18-23	
2. Contribution Amt.	5. Address: 1901 WAZEE # 1402
\$ 500.00	6. City/State/Zip: DENVER, CO PUZOZ
3. Aggregate Amt. *	7. Description: CASH DOWN TON
\$	8. Employer (if applicable, mandatory): COLO RADO ROCKIES
Check box if	A
Electioneering Communication	9. Occupation (if applicable, mandatory):
1. Date Accepted	4. Name (Last, First): MIKE MIKE VIRGINIA SLAVGATER
3-14-23 2. Contribution Amt.	5. Address: 1674 37 AVE PLACE
\$ 100.01	6. City/State/Zip: 6 REELEY, Co 80634
3. Aggregate Amt. *	6. City/State/Zip:
\$ Aggregate Amt.	7. Description: CASH DONATION
	8. Employer (if applicable, mandatory): SLAVGY TER ROOFING
Check box if Electioneering	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	4. Name (Last, First): JIM BONNE NOTESINGER
3-20-23	
2. Contribution Amt.	5. Address: 2120 45 AVENVE
\$ 100.00	6. City/State/Zip: 6REELEY, Co 80634
3. Aggregate Amt. *	6. City/State/Zip: CREELEY, Co 80634 7. Description: (ASM DOMATION)
	8. Employer (if applicable, mandatory):
Check box if Electioneering	9. Occupation (if applicable, mandatory):
Communication	and the state of t
1. Date Accepted	50.7. A/0.7
3-20-23	4. Name (Last, First): EDITH NOTTINGHAM
2. Contribution Amt.	5. Address: 1359 43 AVE, VNIT 6
\$ 700.00	6. City/State/Zip: 6/REELEY CO FUG34
3. Aggregate Amt. *	7. Description: CASH DONATIN
\$	7. Description.
Check box if	8. Employer (if applicable, mandatory):
Electioneering Communication	9. Occupation (if applicable, mandatory):
Communication	

<sup>\*</sup> 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, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

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

Full Name of Committee/Person: COMMITTEE TO ELECT JOHN GATES

PLEASE PRINT/	ТҮРЕ
1. Date Accepted	4. Name (Last, First): LEVI COLLEEN YODER
3-70-23  2. Contribution Amt.	5. Address: 217 N. SZ AVENUE
\$ <b>750.04</b>	6. City/State/Zip: GREELEY, Co foc34
3. Aggregate Amt. *	7. Description: CASY DONATION
\$	
Check box if	8. Employer (if applicable, mandatory):
Electioneering Communication	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	4. Name (Last, First): BRUCE BRODERIUS
3-20-23 2. Contribution Amt.	5. Address: \$601 W. 18 STREET, #57
\$ 150.01	6. City/State/Zip: Checky, Co 80634
3. Aggregate Amt. *	7. Description: Cash Domanow
\$	7. Description.
Check box if	8. Employer (if applicable, mandatory):
Electioneering Communication	9. Occupation (if applicable, mandatory):
P	
1. <u>Date Accepted</u> 3-71-23	4. Name (Last, First): GEORGE BETTY HALL
2. Contribution Amt.	5. Address: 4274 W. I+ ST 120
\$ 100.00	6. City/State/Zip: GREELEY, Co POG34
3. Aggregate Amt. *	7. Description: CASH DONATON
\$	8. Employer (if applicable, mandatory): HALL-IRWIN
Check box if Electioneering	9. Occupation (if applicable, mandatory):
Communication	T
Date Accepted	
3-21-23	4. Name (Last, First): HAROLD (CAROL EWAS
2. Contribution Amt.	5. Address: 1821 FRONTER BOAL
\$ 1,000.00	6. City/State/Zip: 6REELEY, Co 80634
3. Aggregate Amt. *	7. Description: CASH DOLARON
	8. Employer (if applicable, mandatory): <b>といるいち んたっと</b>
Check box if Electioneering	9. Occupation (if applicable, mandatory):
Communication	

<sup>\*</sup> 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, Sec. 3(3); Political Committee Art. XXVIII, Sec. 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

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

Full Name of Committee/Person: COMMITTEE TO ELECT JOHN GATES

PLEASE PRINT/	ГҮРЕ
1. Date Accepted	4. Name (Last, First): PHYLLIS DAVIS
3-21-23	5. Address: 4555 W. 18 STREET
2. Contribution Amt.	5. Address:
(00:00	6. City/State/Zip: GREECEY, Co 80634
3. Aggregate Amt. *	7. Description: CASA DONAITON
Check box if	8. Employer (if applicable, mandatory):
Electioneering	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	4. Name (Last, First): ROBERT ROYLE
3-21-23	5. Address: 2101 24 STREET
2. Contribution Amt.	
230.00	6. City/State/Zip: GREELEY, Co 80631
3. Aggregate Amt. *	7. Description: CASH DONATION
•	8. Employer (if applicable, mandatory):
Check box if Electioneering	9. Occupation (if applicable, mandatory):
Communication	7. Cocupation (a appareus), mandator).
1. Date Accepted	0-1-445505
3-22-27	4. Name (Last, First): RENE WATERS
2. Contribution Amt.	5. Address: 1357 43 Ave., UNIT 19
\$ 750.00	6. City/State/Zip: CREELEY, Co FOGJE
3. Aggregate Amt. *	7. Description: CASH DONARDS
Ψ	
	8. Employer (if applicable, mandatory): SIGNATURE STONE
Check box if	7h/h/
Check box if Electioneering Communication	o. Employer (if applicable, mandatory).
Electioneering Communication	9. Occupation (if applicable, mandatory):  OWNER
Electioneering Communication  1. Date Accepted	9. Occupation (if applicable, mandatory):  4. Name (Last, First):
Electioneering Communication  1. Date Accepted 3-22-23	9. Occupation (if applicable, mandatory):  OWNER
Electioneering Communication  1. Date Accepted	9. Occupation (if applicable, mandatory):  4. Name (Last, First):  6. Only 14/ C. STATET
Electioneering Communication  1. Date Accepted 3-22-23  2. Contribution Amt. \$ 100.00  3. Aggregate Amt. *	9. Occupation (if applicable, mandatory):  4. Name (Last, First): FRED OTIS  5. Address: 6901 W. C STREET
Electioneering Communication  1. Date Accepted 3-22-23  2. Contribution Amt. \$ 100.00  3. Aggregate Amt. *	9. Occupation (if applicable, mandatory):  4. Name (Last, First): FRED OTIS  5. Address: 6901 W. C STREET  6. City/State/Zip: CREELEY, CO 80634  7. Description: (ASH DONATION
Electioneering Communication  1. Date Accepted 3-27-23  2. Contribution Amt. \$ 100.00  3. Aggregate Amt. * \$ Check box if	9. Occupation (if applicable, mandatory):  4. Name (Last, First): FRED OTIS  5. Address: 6901 W. C STREET  6. City/State/Zip: CREELEY, CO 80634  7. Description: (ASH DONATION  8. Employer (if applicable, mandatory): OTIS AND REDINGFIELD ATTORNEYS
Electioneering Communication  1. Date Accepted 3-22-23  2. Contribution Amt. \$ 100.00  3. Aggregate Amt. *	9. Occupation (if applicable, mandatory):  4. Name (Last, First): FRED OTIS  5. Address: 6901 W. C STREET  6. City/State/Zip: GREELEY, Co 80634  7. Description: (ASH DONATION  8. Employer (if applicable, mandatory): OTIS AND REDINGFIECD ATTORNEYS

<sup>\*</sup> 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, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

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

Full Name of Committee/Person: COMMITTEE TO ELECT JOHN GATES

PLEASE PRINT/	ТҮРЕ
1. Date Accepted	4. Name (Last, First): ODIE MARY ROBERTS
3-24-23	5. Address: 2909 45 AVENUE
2. Contribution Amt.	
\$ 200.11	6. City/State/Zip: CREELEY, Co 80134
3. Aggregate Amt. *	7. Description: (ASH DENATED
	8. Employer (if applicable, mandatory): LINCOLN PARK EMPORIUM
Check box if Electioneering	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	4. Name (Last, First): BRIAN JENNIFER BARTERS
<b>3-24-23</b> 2. Contribution Amt.	5. Address: 3946 W. 16 ST LANE
\$ 250.00	6. City/State/Zip: GREECEY, Co 80634
3. Aggregate Amt. *	7. Description: CASH DONATON
\$	8. Employer (if applicable, mandatory): WAVEL COMPONIES
Check box if	
Electioneering Communication	9. Occupation (if applicable, mandatory):
1. <u>Date Accepted</u> 3-24-23	4. Name (Last, First): BRIAN KIM LARSON
2. Contribution Amt.	5. Address: 6600 W. Zo SF # 39
\$ 500.00	6. City/State/Zip: CREELEY, CO 80634
3. Aggregate Amt. *	7. Description: CASH DONATON
	8. Employer (if applicable, mandatory): EDWARD JONES
Check box if Electioneering	9. Occupation (if applicable, mandatory): FINANCIAL ADVISORS
Communication	5. Occupation (if apprendic, <u>mandatory</u> ).
1. Date Accepted	
3-27-23	4. Name (Last, First): DAVID CLARKSON
2. Contribution Amt.	5. Address: 1918 76 AVE CT
\$ (00.00	6. City/State/Zip: GREECEY, Co 80634
3. Aggregate Amt. *	7. Description: (ASH DONATION
\$	CASA (ADA)
1	7. Description: CASH DONATION

<sup>\*</sup> 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, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

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

Full Name of Committee/Person: Committee To FLECT Jour GATES

PLEASE PRINT/	ТҮРЕ
1. Date Accepted	4. Name (Last, First): BILL OFBBY FASTWOOD
3-28-23	5. Address: 4515 W. 14 STREET
2. Contribution Amt.	CASELS. Co Roc 24
200.00	6. City/State/Zip: GREELEY, CV 80634
3. Aggregate Amt. *	7. Description: (ASH DONATE)
Check box if	8. Employer (if applicable, mandatory):
Electioneering	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	4. Name (Last, First): Scott Holly EHRLICH
3-28-23	5. Address: 1414 42 AVENVE
2. Contribution Amt.	
100.00	6. City/State/Zip: GREELEY, Co 80634
3. Aggregate Amt. *	7. Description: (ASH DONATED
Check box if	8. Employer (if applicable, mandatory):
Electioneering	9. Occupation (if applicable, mandatory):
Communication	
Communication	
Date Accepted	ROR DIANE MILLER
	4. Name (Last, First):  808 DIANE MILLEY  2012 A CONTROL OF THE PROPERTY OF TH
1. Date Accepted 3-30-23 2. Contribution Amt.	5. Address: 3542 W. WACON TRAIL IZD.
1. <u>Date Accepted</u> 3-30-23 2. <u>Contribution Amt.</u> \$ 100.00	5. Address: 3542 W. WACON TRAIL IZD. 6. City/State/Zip: GREELEY, Co 80134
1. Date Accepted 3-30-23 2. Contribution Amt.	5. Address: 3542 W. WACON TRAIL IZD.
1. <u>Date Accepted</u> 3-30-23 2. <u>Contribution Amt.</u> \$ 100.00 3. <u>Aggregate Amt.</u> *	5. Address: 3542 W. WACON TRAIL IZD. 6. City/State/Zip: GREELEY, Co 80134 7. Description: CASH DONATION 8. Employer (if applicable, mandatory):
1. <u>Date Accepted</u> 3-30-23 2. <u>Contribution Amt.</u> \$ 100.00 3. <u>Aggregate Amt.</u> *	5. Address: 3542 W. WALON TRAIL IZD. 6. City/State/Zip: GREELEY, CO 80134 7. Description: CASH DONATION
1. <u>Date Accepted</u> 3-30-23 2. <u>Contribution Amt.</u> \$ 100.00 3. <u>Aggregate Amt.</u> * \$	5. Address: 3542 W. WALON TRAIL IED. 6. City/State/Zip: GREELEY, Co 80134 7. Description: CASH DONATION 8. Employer (if applicable, mandatory):
1. Date Accepted 3-30-23 2. Contribution Amt. \$ 100.00 3. Aggregate Amt. * \$  Check box if Electioneering	5. Address: 3542 W. WALLIED. 6. City/State/Zip: GREELEY, Co Soi34 7. Description: CASH DONATION 8. Employer (if applicable, mandatory): RETIRED  9. Occupation (if applicable, mandatory):
1. Date Accepted 3-30-23 2. Contribution Amt. \$ 100.00 3. Aggregate Amt. * \$  Check box if Electioneering Communication	5. Address: 3542 W. WACON TRAIL IZD. 6. City/State/Zip: GREELEY, Co 80134 7. Description: CASH DONAN ON 8. Employer (if applicable, mandatory): 9. Occupation (if applicable, mandatory): RETIRED  4. Name (Last, First): ROBERT TOINTON
1. Date Accepted 3-30-23 2. Contribution Amt. \$ 100.00 3. Aggregate Amt. * \$  Check box if Electioneering Communication  1. Date Accepted 4-4-23 2. Contribution Amt.	5. Address: 3S42 W. WALON TRAILIED.  6. City/State/Zip: GREELEY, Co 80134  7. Description: CASH DONATION  8. Employer (if applicable, mandatory):  9. Occupation (if applicable, mandatory): RETIRED  4. Name (Last, First): ROBERT TOINTON  5. Address: 6305 26 STREET
1. Date Accepted 3-30-23 2. Contribution Amt. \$ 100.00 3. Aggregate Amt. * \$  Check box if Electioneering Communication  1. Date Accepted 4-4-23 2. Contribution Amt. \$ 250.00	5. Address: 3\$42 W. WALLIED. 6. City/State/Zip: GREELEY, Co Sol34 7. Description: CASH DONATION 8. Employer (if applicable, mandatory): PETIRED 9. Occupation (if applicable, mandatory): ROBERT TOINTON
1. Date Accepted 3-30-23 2. Contribution Amt. \$ 100.00 3. Aggregate Amt. * \$  Check box if Electioneering Communication  1. Date Accepted 4-4-23 2. Contribution Amt.	5. Address: 3S42 W. WALLIED.  6. City/State/Zip: GREELEY, Co Sol34  7. Description: CASH DONATION  8. Employer (if applicable, mandatory): PETIRED  9. Occupation (if applicable, mandatory): RETIRED  4. Name (Last, First): ROBERT TOINTON  5. Address: 6305 26 STREET
1. Date Accepted 3-30-23 2. Contribution Amt. \$ 100.00 3. Aggregate Amt. * \$  Check box if Electioneering Communication  1. Date Accepted 4-4-23 2. Contribution Amt. \$ 250.00 3. Aggregate Amt. * \$	5. Address: 3542 W. WALLIED. 6. City/State/Zip: GREELEY, Co SOI34 7. Description: CASH DONANOW 8. Employer (if applicable, mandatory): 9. Occupation (if applicable, mandatory): RETIRED  4. Name (Last, First): ROBERT TOINTON 5. Address: 6305 26 STREET 6. City/State/Zip: GREELEY, Co SO634
1. Date Accepted 3-30-23 2. Contribution Amt. \$ 100.00 3. Aggregate Amt. * \$  Check box if Electioneering Communication  1. Date Accepted 4-4-23 2. Contribution Amt. \$ 250.00 3. Aggregate Amt. *	5. Address: 3S42 W. WALLED.  6. City/State/Zip: GREELEY, Co Sol34  7. Description: CASH DONATION  8. Employer (if applicable, mandatory): RETIRED  4. Name (Last, First): ROBERT TOINTON  5. Address: 630S 26 STREET  6. City/State/Zip: GREELEY, Co Sol34  7. Description: (ASH DONATION)

<sup>\*</sup> 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, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

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

Full Name of Committee/Person: Committee To ELECT JOHN GATES

PLEASE PRINT/	TYPE
1. Date Accepted	4. Name (Last, First): JOHA SUSAN 7000
4-4-23	5. Address: 1756 37 Ave. PLACE
2. Contribution Amt.	5. Address: (736 37 AVE. 1632E
\$ 500.00	6. City/State/Zip: GREECEY, CO 80134
3. Aggregate Amt. *	6. City/State/Zip: GREECEY, Co 80134 7. Description: CASY DONARON
Check box if	8. Employer (if applicable, mandatory):
Electioneering	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	TRAVE TOURS CHAMBE
4-4-23	4. Name (Last, First): TRAVIS JENNIFER GILLMORE
2. Contribution Amt.	5. Address: <b>7665 54 AVENVE</b>
\$ 100.00	6. City/State/Zip: GREELEY, Co 80634
3. Aggregate Amt. *	7. Description: CASH DONA TON
\$	8. Employer (if applicable, mandatory): PHELPS-TOLNTON /NC.
Check box if	Guera Dice
Electioneering Communication	9. Occupation (if applicable, mandatory):
1. <u>Date Accepted</u> 4-7-23	4. Name (Last, First): STEVE JOYCE MURENO
2. Contribution Amt.	5. Address: 136 N. So AVE PLACE
\$ 108.00	6. City/State/Zip: CREECEY, Co 80634
3. Aggregate Amt. *	7. Description: CASH DONARON
\$	8. Employer (if applicable, mandatory): RETIREM
Check box if	
Electioneering	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	4. Name (Last, First): CHVCK   FAM COUPER
4-12-23	5. Address: 2903 70 AVENVE
2. Contribution Amt. \$ 700.00	J. 1100000.
<b>P</b> • • • • •	6. City/State/Zip: CREEUT, Lo 80634
3. Aggregate Amt. *	7. Description: CASH DONATON
	8. Employer (if applicable, mandatory): SELK-EMPLOYED
	o. Limprojor (in approvide), interneutory).
Check box if Electioneering	9. Occupation (if applicable, mandatory): FINANCIAL ADVISOR

<sup>\*</sup> 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, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

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

### Full Name of Committee/Person: Committee To FLECT JOHN GATES

PLEASE PRINT/	
1. Date Accepted	4. Name (Last, First): ROCEN KNOPH
4-12-23	
2. Contribution Amt.	5. Address: 5445 W. 7 ST RD
\$ 250.00	6. City/State/Zip: GREELEY, Co 80634
3. Aggregate Amt. *	7. Description: (ASN DONATION
Ψ	8. Employer (if applicable, mandatory): ENVIROTECH
Check box if	1.//20
Electioneering	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	4. Name (Last, First): KEN/ELIZABETH OLDS
5-2-23	
2. Contribution Amt.	5. Address: 1212 So AVENUE
\$ 100.00	6. City/State/Zip: CREEURY Co fo634
3. Aggregate Amt. *	7. Description: CASH DOWNTON
\$	
Check box if	8. Employer (if applicable, mandatory):
Electioneering	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	Relay CHAIT
1. Date Accepted	4. Name (Last, First): BOR ANN CHENT
	5. Address: 3520 HULMAN COURT
1. <u>Date Accepted</u> 6-13-23	5. Address: 3520 HULMAN COURT  6. City/State/Zip: GREELEY, Co 80634
1. <u>Date Accepted</u> 6-13-23 2. <u>Contribution Amt.</u> \$ 500.00 3. <u>Aggregate Amt.</u> *	5. Address: 3520 HULMAN COURT  6. City/State/Zip: GREELEY, Co 80634
1. <u>Date Accepted</u> 6-13-23 2. <u>Contribution Amt.</u> \$ 500.00	5. Address: 3520 HOLMAN COURT  6. City/State/Zip: CREELEY, Co 80634  7. Description: CASH DONATION
1. Date Accepted 6-13-23 2. Contribution Amt. \$ 500.00 3. Aggregate Amt. * \$ Check box if	5. Address: 3520 HOLMAN COURT  6. City/State/Zip: CREELEY, Co Substance  7. Description: CASH DONATION  8. Employer (if applicable, mandatory): GHENT MOTION
1. Date Accepted 6-13-23 2. Contribution Amt. \$ Soo.o. 3. Aggregate Amt. * \$  Check box if Electioneering	5. Address: 3520 HOLMAN COURT  6. City/State/Zip: CREELEY, Co 80634  7. Description: CASH DONATION
1. Date Accepted 6-13-23 2. Contribution Amt. \$ 500.00 3. Aggregate Amt. * \$ Check box if	5. Address: 3520 HOLMAN COURT  6. City/State/Zip: CREELEY, Co Substance  7. Description: CASH DONATION  8. Employer (if applicable, mandatory): GHENT MOTION
1. Date Accepted 6-13-23 2. Contribution Amt. \$ 500.00 3. Aggregate Amt. * \$ Check box if Electioneering Communication 1. Date Accepted	5. Address: 3520 MOLMAN COURT 6. City/State/Zip: GREELEY, Co Substitution: CASH DONATION 7. Description: CASH DONATION 8. Employer (if applicable, mandatory): GHENT MOTIAS 9. Occupation (if applicable, mandatory): OWNER
1. Date Accepted 6-13-23 2. Contribution Amt. \$ 500.00 3. Aggregate Amt. * \$  Check box if Electioneering Communication  1. Date Accepted 7-29-23	5. Address: 3520 MOLMAN COURT  6. City/State/Zip: CREELEY, Co ful34  7. Description: CASH DONATION  8. Employer (if applicable, mandatory): GHENT MOTORS  9. Occupation (if applicable, mandatory): OWNER  4. Name (Last, First): CARL JOANN HW
1. Date Accepted 6-13-23 2. Contribution Amt. \$ 500.00 3. Aggregate Amt. * \$ Check box if Electioneering Communication  1. Date Accepted 7-29-23 2. Contribution Amt.	5. Address: 3520 HOLMAN COURT  6. City/State/Zip: GREELEY, Co BUGGF  7. Description: CASH DONATION  8. Employer (if applicable, mandatory): GHENT MOTORS  9. Occupation (if applicable, mandatory): OWNER  4. Name (Last, First): CARL JOANN HIW  5. Address: 4527 W. 14 STREET
1. Date Accepted 6-13-23 2. Contribution Amt. \$ 500.00 3. Aggregate Amt. * \$  Check box if Electioneering Communication  1. Date Accepted 7-29-23 2. Contribution Amt. \$ 100.00	5. Address: 3520 MOLMAN COURT  6. City/State/Zip: CREELEY, Co ful34  7. Description: CASH DONATION  8. Employer (if applicable, mandatory): GHENT MOTORS  9. Occupation (if applicable, mandatory): OWNER  4. Name (Last, First): CARL JOANN HW
1. Date Accepted 6-13-23 2. Contribution Amt. \$ 500.00 3. Aggregate Amt. * \$  Check box if Electioneering Communication  1. Date Accepted 7-29-23 2. Contribution Amt. \$ 100.00 3. Aggregate Amt. *	5. Address: 3520 HOLMAN COURT  6. City/State/Zip: GREELEY, Co BUGGF  7. Description: CASH DONATION  8. Employer (if applicable, mandatory): GHENT MOTORS  9. Occupation (if applicable, mandatory): OWNER  4. Name (Last, First): CARL JOANN HIW  5. Address: 4527 W. 14 STREET
1. Date Accepted 6-13-23 2. Contribution Amt. \$ 500.00 3. Aggregate Amt. * \$  Check box if Electioneering Communication  1. Date Accepted 7-29-23 2. Contribution Amt. \$ 100.00	5. Address: 3520 HOLMAN COVRT  6. City/State/Zip: CREELEY, Co 80634  7. Description: CASM DONATION  8. Employer (if applicable, mandatory): GMENT MOTORS  9. Occupation (if applicable, mandatory): OWNER  4. Name (Last, First): CARL JOANN HIW  5. Address: 4527 W. 14 STREET  6. City/State/Zip: GREELEY, Co 80634  7. Description: CASM DONATION
1. Date Accepted  6-13-23  2. Contribution Amt.  \$ 500.00  3. Aggregate Amt. *  Check box if Electioneering Communication  1. Date Accepted  7-29-23  2. Contribution Amt.  \$ 100.00  3. Aggregate Amt. *  Check box if	5. Address: 3520 HOLMAN COURT  6. City/State/Zip: GREELEY, Co 80634  7. Description: CASH DONATION  8. Employer (if applicable, mandatory): GHENT MOTORS  9. Occupation (if applicable, mandatory): OWNER  4. Name (Last, First): CARL JOANN HILL  5. Address: 4527 W. 14 STREET  6. City/State/Zip: GREELEY, Co 80634  7. Description: CASH DONATION  8. Employer (if applicable, mandatory):
1. Date Accepted  6-13-23  2. Contribution Amt.  \$ 500.00  3. Aggregate Amt. *  Check box if Electioneering Communication  1. Date Accepted  7-29-23  2. Contribution Amt.  \$ 100.00  3. Aggregate Amt. *  \$	5. Address: 3520 HOLMAN COVRT  6. City/State/Zip: CREELEY, Co 80634  7. Description: CASM DONATION  8. Employer (if applicable, mandatory): GMENT MOTORS  9. Occupation (if applicable, mandatory): OWNER  4. Name (Last, First): CARL JOANN HIW  5. Address: 4527 W. 14 STREET  6. City/State/Zip: GREELEY, Co 80634  7. Description: CASM DONATION

<sup>\*</sup> 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, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

## Schedule A – Itemized Contributions Statement (\$20 or more) [C.R.S. 1-45-108(1)(a)]

#### Full Name of Committee/Person:

PLEASE PRINT/	ГУРЕ
1. Date Accepted	4. Name (Last, First): GREELEY AREA REALTOR ASSOCIATION
10-9-23	5. Address: 1620 25 Avenue
2. Contribution Amt.	
\$ 1000.00	6. City/State/Zip: CREELEY, Co fob34
3. Aggregate Amt. *	7. Description: (ASM DOUATION)  8. Employer (if applicable, mandatory):
Check box if Electioneering Communication	9. Occupation (if applicable, mandatory):
1. Date Accepted	4. Name (Last, First):
2. Contribution Amt.	5. Address:
3. Aggregate Amt. *	6. City/State/Zip:
\$	7. Description:
Check box if	8. Employer (if applicable, mandatory):
Electioneering	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	4. Name (Last, First):
2. Contribution Amt.	5. Address:
\$	6. City/State/Zip:
3. Aggregate Amt. *	7. Description:
	8. Employer (if applicable, mandatory):
Check box if Electioneering Communication	9. Occupation (if applicable, mandatory):
1. Date Accepted	4. Name (Last, First):
2. Contribution Amt.	5. Address:
\$	6. City/State/Zip:
3. Aggregate Amt. *	7. Description:
	8. Employer (if applicable, mandatory):
Check box if Electioneering Communication	9. Occupation (if applicable, mandatory):

<sup>\*</sup> 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, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

# Schedule B – Itemized Expenditures Statement (\$20 or more) [1-45-108(1)(a), C.R.S.]

Full Name of Committ	ee/Person: Committee To ELECT Joun GATES		
PLEASE PRINT/TYPE	PLEASE PRINT/TYPE		
1. Date Expended	4. Name: GVARDIAN STORAGE		
12-23-22	4. Name:		
2. Amount	5. Address: 2600 36 AVEN OF		
\$ 1,696.00	6. City/State/Zip: GREELEY, Co fo634		
3.Recipient is (optional):	7. Purpose of Expenditure: SION STORAGE		
Committee	7. Purpose of Expenditure:		
Non-Committee	Check box if Electioneering Communication		
1. Date Expended	Parlana Paras		
2-17-23	4. Name: PIONEER PRESS		
2. Amount	5. Address: 2965 27 AVENUE		
\$ 185.00	6. City/State/Zip: GREELEY, Co 80634		
3. Recipient is (optional):	7. Purpose of Expenditure: PRINTNO		
Committee Non-Committee			
	Check box if Electioneering Communication		
1. Date Expended	FED-EX OFFICE		
3-8-23	4. Name: Feb-Ex Office		
2. Amount	5. Address: 3607 W. 10 STREET		
\$ 171.22	6. City/State/Zip: CD F0639		
3.Recipient is (optional):	o. City/State/Zip:		
Committee	7. Purpose of Expenditure: PRINT NO		
Non-Committee	Check box if Electioneering Communication		
1. Date Expended	4. Name: CREELEY CHAMBER OF COMMERCE		
3-20-23 2. Amount	4. Name: CREECEY CHAMBER OF COMMERCE  5. Address: 902 7 AVENUE		
\$ 100.01			
3. Recipient is (optional):	6. City/State/Zip: GNEELEY, CO FUG] 7. Purpose of Expenditure: MEMBENSHIP DUES		
Committee	7. Purpose of Expenditure: MEMBERISHIP DUES		
Non-Committee	Check box if Electioneering Communication		
1. Date Expended	Wish Wans 7 Wans		
4-21-23	4. Name: VELY VORIED C VOINED		
2. Amount	5. Address: PO BOX 336962		
\$ 440.00	4. Name: WELL WOMEN 2 WINEN  5. Address: PO BOX 336962  6. City/State/Zip: Cheevey, Co fol33  7. Purpose of Expenditure: EVENT SPINSIASHIP		
3.Recipient is (optional):	o. Chy/State/Zip:		
Committee	7. Purpose of Expenditure: EVENT SPINSINSKI		
Non-Committee	Check box if Electioneering Communication		
	Colorado Secretary of State Form Rev. 12/09		

# Schedule B – Itemized Expenditures Statement (\$20 or more) [1-45-108(1)(a), C.R.S.]

Full Name of Committ	ee/Person: CommiTTEE TO FLECT JOHN LATES
PLEASE PRINT/TYPE	
1. Date Expended	4. Name: CREEKLEY CHAMBER OF COMMERCE
6-27-23	4. Name: Colored Color
2. Amount	5. Address: 902 7 AVENVE
\$ 500.00	6 City/State/Zin: CREELEY, Co 80631
3.Recipient is (optional):  Committee	6. City/State/Zip: CREELEY, Co 80631 7. Purpose of Expenditure: FRAIRE DOC TOURNAMENT SPONSORSMIT
Non-Committee	l promise de la companya del companya del companya de la companya
	Check box if Electioneering Communication
1. Date Expended	4. Name: ALE MARDWARE
8-14-23 2. Amount	5. Address: 3540 W. 10 STREET
150 10	5. Address:
\$ 133.(7) 3.Recipient is (optional):	6. City/State/Zip: CREGLEY, Lo F0634 7. Purpose of Expenditure: SAND BASS
Committee	7. Purpose of Expenditure: SANS BASS
Non-Committee	Check box if Electioneering Communication
1. Date Expended	1 + + + + + + + + + + + + + + + + + +
8-19-23	4. Name: ALE MARAWARE
2. Amount	5. Address: 3540 W. 10 STREET
\$ 192.40	6. City/State/Zip: 6REELEY, Co 80634
3. Recipient is (optional):	6. City/State/Zip:
Committee	7. Purpose of Expenditure: SAND GALT
Non-Committee	Check box if Electioneering Communication
1. <u>Date Expended</u> 10-3-23	4. Name: PROJETA PRESS
2. Amount	5. Address: 7965 27 AVENUE
\$ 128.41	5. Address
3. Recipient is (optional):	6. City/State/Zip: 612ELEY, Co 80634
Committee	7. Purpose of Expenditure: PRINTING
Non-Committee	Check box if Electioneering Communication
1. Date Expended	UNITED STATES POSTAL SETEVICE
10-4-23	4. Name: 92. 24 1 - 1 - 5
2. Amount	5. Address:
\$ 198.00	4. Name:
3.Recipient is (optional):  Committee	7. Purpose of Expenditure: STAMPS
Non-Committee	Check box if Electioneering Communication
	Licheck box ii Electioneering Communication

## Schedule B – Itemized Expenditures Statement (\$20 or more) [1-45-108(1)(a), C.R.S.]

Full Name of Committ	ee/Person: LOMMITTEE TO ELECT JOUN CATET	
PLEASE PRINT/TYPE		
1. Date Expended  (AS LISTED)	4. Name: FMS BANK	
2. Amount	5. Address: 2425 35 Avenue	
\$ 50.00	6 City/State/Zin: GREELEY CO 80639-	
3.Recipient is (optional):  Committee	7 Purpose of Expanditure. RANK FEE & \$ 5.01 (12-30/2-2/3-2/3-31/5-2/	
Non-Committee	4. Name:  2425 35 Avenue  5. Address:  6. City/State/Zip:  7. Purpose of Expenditure:  RANK REE \$5.00 (12-30/2-2/3-2/3-31/5-2/  Check box if Electioneering Communication  6-2/6-30/6-2/9-1/10-2	
1. Date Expended	4. Name:	
2. Amount	5. Address:	
\$ 3.Recipient is (optional): Committee Non-Committee	6. City/State/Zip:	
	7. Purpose of Expenditure:	
	Check box if Electioneering Communication	
1. Date Expended	4. Name:	
2. Amount	5. Address:	
\$ 3.Recipient is (optional):	6. City/State/Zip:	
Committee	7. Purpose of Expenditure:	
Non-Committee	Check box if Electioneering Communication	
1. Date Expended	4. Name:	
2. Amount	5. Address:	
3.Recipient is (optional):  Committee	6. City/State/Zip:	
	7. Purpose of Expenditure:	
Non-Committee	Check box if Electioneering Communication	
1. Date Expended	4. Name:	
2. Amount	5. Address:	
\$ 3.Recipient is (optional):	6. City/State/Zip:	
Committee	7. Purpose of Expenditure:	
Non-Committee	Check box if Electioneering Communication	

Colorado Secretary of State Elections Division 1700 Broadway, Suite 200 Denver, CO 80290 Ph: (303) 894-2200 Fax: (303) 869-4861 Email: cpfhelp@sos.state.co.us Website: www.sos.state.co.us



#### **NOTICE OF MAJOR CONTRIBUTOR**

[1-45-108(2.5)]

This report is mandatory for all committees and political parties for contributions of \$1000 or more (monetary or non-monetary) received within 30 days immediately preceding a primary or general election.

This report shall be filed with the Secretary of State within 24 hours after receipt of the contribution.

Loans to committees are considered contributions

Name of Committee Receiving Contribution: Committee to Elect John Gates			
C Non-Monetary (item/s)			
Amount of Contribution: \$ 1,000.00			
Date:			
Date: 10-9-23			

This form may be saved

Form may be submitted by Fax, E-mail, hand delivery, or postal service.

The original is not required by this office please submit only once.

Attach additional pages if needed.

Save & Print