

Elections Division
 Department of State
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Space Below For Office Use Only

REPORT OF CONTRIBUTIONS AND EXPENDITURES

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

| | |
|---|--|
| Full Name of Committee/Person: | Committee to Elect Nicole Matkowsky <small>As Shown on Registration</small> |
| Address of Committee/Person: | 13352 Franklin Street |
| City, State & Zip Code: | Thornton, CO 80241 |
| Committee Type: | Candidate |
| Name and Address of Financial Institution: | 1st Bank - 13600 Colorado Blvd, Thornton, CO 80602 |

SOS ID NUMBER (state and county committees ONLY):

N/A

Type of Report:

Regularly Scheduled Filing.

October 17, 2023 (21 days prior to the November 7, 2023 Municipal Election)
 November 3, 2023 (Friday prior to the November 7, 2023 Municipal Election)
 December 12, 2023 (35 days after the November 7, 2023 Municipal Election)
 Annual - candidates from prior election held on

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

Termination Report (Termination Reports **MUST** have a Monetary Balance of Zero in Line 5)

Reporting Period Covered: 10/13/23 **Through** 10/29/23
date date

Declared Total Spending (if applicable): [Art. XXVIII, Sect. 4 (1)] \$ N/A

| | | Totals Detailed Summary Page |
|---|--|------------------------------|
| 1 | Funds on Hand at Beginning of Reporting Period (monetary only) | \$4,179.61 |
| 2 | Total Monetary Contributions (line 11) | \$2,625.00 |
| 3 | Total of Monetary Contributions & Beginning Amount (line 1+ line 2) | \$6,804.61 |
| 4 | Total Monetary Expenditures (line 19) | \$6,190.39 |
| 5 | Funds on Hand at End of Reporting Period (monetary) (line 3 - line 4) | \$614.22 |

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.
 [Art. XXVIII Sect. 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 (Treasurer's) Name: _____

Registered Agent's (Treasurer's) Signature: _____ Date: _____

Print Candidate Name: Nicole Matkowsky

Candidate's Signature: Nicole Matkowsky Date: 11/2/23

DETAILED SUMMARY

Full Name of Committee/Person: Committee to Elect Nicole Matkowskky

Current Reporting Period: 10/13/23 Through 10/29/23

| | | |
|--|--|-------------------|
| Funds on hand at the beginning of reporting period (Monetary Only): | | |
| 6 | Itemized Contributions \$20 or More [CRS 1-45-108(1)(a)] (Please list on Schedule "A") | \$2,625.00 |
| 7 | Total of Non-Itemized Contributions (Contributions of \$19.99 and Less) | |
| 8 | Loans Received (Please list on Schedule "C") | \$0.00 |
| 9 | Total of Other Receipts (Interest, Dividends, etc.) | |
| 10 | Returned Expenditures (from recipient) (Please list on Schedule "D") | \$0.00 |
| 11 | Total Monetary Contributions (Total of lines 6 through 10) | \$2,625.00 |
| 12 | Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions) | \$0.00 |
| 13 | Total Contributions (Line 11 + line 12) | \$2,625.00 |
| 14 | Itemized Expenditures \$20 or More [CRS 1-45-108(1)(a)] (Please list on Schedule "B") | \$6,190.39 |
| 15 | Total of Non-Itemized Expenditures (Expenditures of \$19.99 and less) | |
| 16 | Loan Repayments Made (Please list on Schedule "C") | \$0.00 |
| 17 | Returned Contributions (To Donor) (Please list on Schedule "D") | \$0.00 |
| 18 | Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only) | |
| 19 | Total Monetary Expenditures (Total of lines 14 through 17) | \$6,190.39 |
| 20 | Total Monetary Expenditures (Line 18 + Line 19) | \$6,190.39 |

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

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

Full Name of Committee/Person: Committee to Elect Nicole Matkowskky

Reporting Period Covered: 10/13/23 **Through** 10/29/23
date date

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

Total Itemized Contributions: \$ 2,625.00

PLEASE PRINT/TYPE

| | |
|---|---|
| 1 <u>Date Accepted</u> 10/14/2023 | 4 Name (Last, First): <u>Stokes, Greg</u> |
| 2 <u>Contribution Amount</u> \$ 100.00 | 5 Address: <u>15575 Willow Street</u> |
| 3 <u>Aggregate Amount*</u> \$ | 6 City/State/Zip: <u>Thornton, CO 80602</u> |
| | 7 Description: <u>Anedot - Online donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): <u>Retired</u> |
| | 9 Occupation (if applicable, <u>mandatory</u>): _____ |

| | |
|---|---|
| 1 <u>Date Accepted</u> 10/14/2023 | 4 Name (Last, First): <u>McCarthy, Timothy</u> |
| 2 <u>Contribution Amount</u> \$ 100.00 | 5 Address: <u>809 5th Street</u> |
| 3 <u>Aggregate Amount*</u> \$ | 6 City/State/Zip: <u>Golden, CO 80403</u> |
| | 7 Description: <u>Anedot - Online donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): <u>Schedio Group LLC</u> |
| | 9 Occupation (if applicable, <u>mandatory</u>): <u>Engineer</u> |

| | |
|---|---|
| 1 <u>Date Accepted</u> 10/17/2023 | 4 Name (Last, First): <u>Grove, Treva</u> |
| 2 <u>Contribution Amount</u> \$ 200.00 | 5 Address: <u>141 S Upas Street</u> |
| 3 <u>Aggregate Amount*</u> \$ 225.00 | 6 City/State/Zip: <u>Escondido, CA 92025</u> |
| | 7 Description: <u>Check donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): <u>Lake Chiropractic</u> |
| | 9 Occupation (if applicable, <u>mandatory</u>): <u>Office Manager</u> |

| | |
|--|--|
| 1 <u>Date Accepted</u> 10/17/2023 | 4 Name (Last, First): <u>Greco, Thomas</u> |
| 2 <u>Contribution Amount</u> \$ 25.00 | 5 Address: <u>13340 Milwaukee Ct</u> |
| 3 <u>Aggregate Amount*</u> \$ | 6 City/State/Zip: <u>Thornton, CO 80241</u> |
| | 7 Description: <u>Anedot - Online donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): _____ |
| | 9 Occupation (if applicable, <u>mandatory</u>): _____ |

* 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)

Full Name of Committee/Person: Committee to Elect Nicole Matkowskky

Reporting Period Covered:

10/13/23

Through

10/29/23

date

date

PLEASE PRINT/TYPE

| | |
|--|--|
| 1 <u>Date Accepted</u> 10/17/2023 | 4 Name (Last, First): <u>Sprance, Robert</u> |
| 2 <u>Contribution Amount</u> \$ 50.00 | 5 Address: <u>48 Primrose Ave</u> |
| 3 <u>Aggregate Amount*</u> \$ | 6 City/State/Zip: <u>Hicksville, NY 11801</u> |
| | 7 Description: <u>Anedot - Online donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): _____ |
| | 9 Occupation (if applicable, <u>mandatory</u>): _____ |

| | |
|---|--|
| 1 <u>Date Accepted</u> 10/20/2023 | 4 Name (Last, First): <u>Pachner, Marcus</u> |
| 2 <u>Contribution Amount</u> \$ 100.00 | 5 Address: <u>4700 East 6th Ave</u> |
| 3 <u>Aggregate Amount*</u> \$ | 6 City/State/Zip: <u>Denver, CO 80220</u> |
| | 7 Description: <u>Anedot - Online donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): <u>TPC</u> |
| | 9 Occupation (if applicable, <u>mandatory</u>): <u>Consultant</u> |

| | |
|---|--|
| 1 <u>Date Accepted</u> 10/20/2023 | 4 Name (Last, First): <u>Pachner, Marcus</u> |
| 2 <u>Contribution Amount</u> \$ 100.00 | 5 Address: <u>4700 East 6th Ave</u> |
| 3 <u>Aggregate Amount*</u> \$ 200.00 | 6 City/State/Zip: <u>Denver, CO 80220</u> |
| | 7 Description: <u>Anedot - Online donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): <u>TPC</u> |
| | 9 Occupation (if applicable, <u>mandatory</u>): <u>Consultant</u> |

| | |
|--|--|
| 1 <u>Date Accepted</u> 10/21/2023 | 4 Name (Last, First): <u>Ehlers, Barry</u> |
| 2 <u>Contribution Amount</u> \$ 50.00 | 5 Address: <u>PO Box 851</u> |
| 3 <u>Aggregate Amount*</u> \$ | 6 City/State/Zip: <u>Broomfield, CO 80038</u> |
| | 7 Description: <u>Anedot - Online donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): _____ |
| | 9 Occupation (if applicable, <u>mandatory</u>): _____ |

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

Full Name of Committee/Person: Committee to Elect Nicole Matkowskky

Reporting Period Covered:

| | | |
|---------------------------------|----------------|---------------------------------|
| 10/13/23 <small>date</small> | Through | 10/29/23 <small>date</small> |
|---------------------------------|----------------|---------------------------------|

PLEASE PRINT/TYPE

| | |
|---|--|
| 1 <u>Date Accepted</u> 10/23/2023 | 4 Name (Last, First): <u>Colorado School Employees Association</u> |
| 2 <u>Contribution Amount</u> \$ 500.00 | 5 Address: <u>1480 roseanna Drive</u> |
| 3 <u>Aggregate Amount*</u> \$ | 6 City/State/Zip: <u>Northglenn, CO 80234</u> |
| | 7 Description: <u>Check donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): _____ |
| | 9 Occupation (if applicable, <u>mandatory</u>): _____ |

| | |
|---|---|
| 1 <u>Date Accepted</u> 10/26/2023 | 4 Name (Last, First): <u>Seymour, Richard</u> |
| 2 <u>Contribution Amount</u> \$ 100.00 | 5 Address: <u>9705 Kipling Street</u> |
| 3 <u>Aggregate Amount*</u> \$ | 6 City/State/Zip: <u>Westminster, CO 80021</u> |
| | 7 Description: <u>Anedot - Online donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): <u>Farmers Insurance</u> |
| | 9 Occupation (if applicable, <u>mandatory</u>): <u>Insurance Agent</u> |

| | |
|---|---|
| 1 <u>Date Accepted</u> 10/28/2023 | 4 Name (Last, First): <u>Springer, Sandi</u> |
| 2 <u>Contribution Amount</u> \$ 100.00 | 5 Address: <u>13432 Humboldt Street</u> |
| 3 <u>Aggregate Amount*</u> \$ 1150.00 | 6 City/State/Zip: <u>Thornton, CO 80241</u> |
| | 7 Description: <u>Check donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): <u>Retired</u> |
| | 9 Occupation (if applicable, <u>mandatory</u>): _____ |

| | |
|---|--|
| 1 <u>Date Accepted</u> 10/28/2023 | 4 Name (Last, First): <u>Apartment Association of Metro Denver</u> |
| 2 <u>Contribution Amount</u> \$ 500.00 | 5 Address: <u>7100 East Belleview Avenue Ste305</u> |
| 3 <u>Aggregate Amount*</u> \$ | 6 City/State/Zip: <u>Greenwood Village, CO 80111</u> |
| | 7 Description: <u>Check donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): _____ |
| | 9 Occupation (if applicable, <u>mandatory</u>): _____ |

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Full Name of Committee/Person: Committee to Elect Nicole Matkowskky

Reporting Period Covered:

10/13/23
date

Through

10/29/23
date

PLEASE PRINT/TYPE

| | |
|---|--|
| 1 <u>Date Accepted</u> 10/28/2023 | 4 Name (Last, First): <u>Walsh, Sean</u> |
| 2 <u>Contribution Amount</u> \$ 200.00 | 5 Address: <u>1065 N Emerson St Apt B</u> |
| 3 <u>Aggregate Amount*</u> \$ | 6 City/State/Zip: <u>Denver, CO 80218</u> |
| | 7 Description: <u>Check donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): <u>Self</u> |
| | 9 Occupation (if applicable, <u>mandatory</u>): <u>Consultant</u> |

| | |
|---|---|
| 1 <u>Date Accepted</u> 10/28/2023 | 4 Name (Last, First): <u>Carlson, Scott Lee</u> |
| 2 <u>Contribution Amount</u> \$ 500.00 | 5 Address: <u>12460 1st Street</u> |
| 3 <u>Aggregate Amount*</u> \$ | 6 City/State/Zip: <u>Eastlake, CO 80614-0247</u> |
| | 7 Description: <u>Check donation</u> |
| | 8 Employer (if applicable, <u>mandatory</u>): <u>Carlson Assoc</u> |
| | 9 Occupation (if applicable, <u>mandatory</u>): <u>Partner</u> |

| | |
|------------------------------------|--|
| 1 <u>Date Accepted</u> | 4 Name (Last, First): _____ |
| 2 <u>Contribution Amount</u> \$ | 5 Address: _____ |
| 3 <u>Aggregate Amount*</u> \$ | 6 City/State/Zip: _____ |
| | 7 Description: _____ |
| | 8 Employer (if applicable, <u>mandatory</u>): _____ |
| | 9 Occupation (if applicable, <u>mandatory</u>): _____ |

| | |
|------------------------------------|--|
| 1 <u>Date Accepted</u> | 4 Name (Last, First): _____ |
| 2 <u>Contribution Amount</u> \$ | 5 Address: _____ |
| 3 <u>Aggregate Amount*</u> \$ | 6 City/State/Zip: _____ |
| | 7 Description: _____ |
| | 8 Employer (if applicable, <u>mandatory</u>): _____ |
| | 9 Occupation (if applicable, <u>mandatory</u>): _____ |

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Schedule B - Itemized Expenditures Statement (\$20 or more)

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

Full Name of Committee/Person: Committee to Elect Nicole Matkowsky

Reporting Period Covered: 10/13/23 **Through** 10/29/23
date date

Total Itemized Expenditures: 6,190.39

PLEASE PRINT/TYPE

| | |
|---|---|
| 1 <u>Date Expended</u> 10/17/23 | 4 Name (Last, First): <u>Mittera</u> |
| 2 <u>Amount</u> \$ 1006.00 | 5 Address: <u>5000 Osage Street #100</u> |
| 3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee | 6 City/State/Zip: <u>Denver, CO 80221</u> |
| | 7 Purpose of Expenditure: <u>Mailer</u> |

| | |
|---|---|
| 1 <u>Date Expended</u> 10/18/23 | 4 Name (Last, First): <u>Mittera</u> |
| 2 <u>Amount</u> \$ 2992.91 | 5 Address: <u>5000 Osage Street #100</u> |
| 3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee | 6 City/State/Zip: <u>Denver, CO 80221</u> |
| | 7 Purpose of Expenditure: <u>Mailer</u> |

| | |
|---|--|
| 1 <u>Date Expended</u> 10/20/23 | 4 Name (Last, First): <u>Horizon Reprograhics</u> |
| 2 <u>Amount</u> \$ 244.83 | 5 Address: <u>1030 W Ellsworth Avenue, Unit G</u> |
| 3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee | 6 City/State/Zip: <u>Denver, CO 80223</u> |
| | 7 Purpose of Expenditure: <u>Postcard Printing</u> |

| | |
|---|--|
| 1 <u>Date Expended</u> 10/25/23 | 4 Name (Last, First): <u>Horizon Reprograhics</u> |
| 2 <u>Amount</u> \$ 86.72 | 5 Address: <u>1030 W Ellsworth Avenue, Unit G</u> |
| 3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee | 6 City/State/Zip: <u>Denver, CO 80223</u> |
| | 7 Purpose of Expenditure: <u>Postcard Printing</u> |

Schedule B - Itemized Expenditures Statement (\$20 or more)

Full Name of Committee/Person: Committee to Elect Nicole Matkowskky

Reporting Period Covered:

10/13/23

date

Through

10/29/23

date

PLEASE PRINT/TYPE

| | |
|---|---|
| 1 <u>Date Expended</u> 10/26/23 | 4 Name (Last, First): <u>Mittera</u> |
| 2 <u>Amount</u> \$ 1832.53 | 5 Address: <u>5000 Osage Street #100</u> |
| 3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee | 6 City/State/Zip: <u>Denver, CO 80221</u> |
| | 7 Purpose of Expenditure: <u>Mailer</u> |

| | |
|---|---|
| 1 <u>Date Expended</u> 10/28/23 | 4 Name (Last, First): <u>Anedot</u> |
| 2 <u>Amount</u> \$ 27.40 | 5 Address: <u>www.anedot.com</u> |
| 3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee | 6 City/State/Zip: _____ |
| | 7 Purpose of Expenditure: <u>October Account Fees</u> |

| | |
|---|---------------------------------|
| 1 <u>Date Expended</u> | 4 Name (Last, First): _____ |
| 2 <u>Amount</u> \$ | 5 Address: _____ |
| 3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee | 6 City/State/Zip: _____ |
| | 7 Purpose of Expenditure: _____ |

| | |
|---|---------------------------------|
| 1 <u>Date Expended</u> | 4 Name (Last, First): _____ |
| 2 <u>Amount</u> \$ | 5 Address: _____ |
| 3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee | 6 City/State/Zip: _____ |
| | 7 Purpose of Expenditure: _____ |