Elections Division Department of State Department of State 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

		(C.R.S. 1-45-108)			
Full Name of Com	mittee/Person:	Committee to Elect Julia Marvin As Shown on Registration			
Address of Commi	ittee/Person:	10305 Gaylord St			
City, State & Zip	Code:	Thornton, CO 80229			
Committee Type:		Political Committee			
	s of Financial Institution:		Firstbank, 3990 East 104th Ave. Thornton, CO 80233		
1100000		21200			
SOS ID	NUMBER (state and county	committees ONLY):		N/A	
Type of Report: Regularly Scheduled Filing. October 15, 2019 (21 days prior to the November 5, 2019 Municipal Election) November 1, 2019 (Friday prior to the November 5, 2019 Municipal Election) December 5, 2019 (30 days after the November 5, 2019 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: 10/11/19 Through 10/29/19 date Declared Total Spending (if applicable): [Art.				10/29/19	
			-1	Totals Detailed Summary Page	
	nd at Beginning of Reporting P	eriod (monetary only)		\$6,099.34	
	ry Contributions (line 11)			\$1,700.00	
THE RESIDENCE OF THE PARTY OF T	etary Contributions & Beginnin ry Expenditures (line 19)	g Amount (line 1+ line 2)		\$7,799.34 \$6,779.61	
	nd at End of Reporting Period ((monetary) (line 3 - line 4)		\$1,019.73	
J I did on III	no ne zna or reporting remot	noneury) (inc 3 - inc 4)		Ψ1,017.73	
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 hearby 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: Candidate's Signature: Date: 11119					

DETAILED SUMMARY

Full Name of Committee/Person: Committee to Elect Julia Marvin

Current Reporting Period: 10/11/19 Through 10/29/19

- Cu1101	Through	10/29/19
Funds	on hand at the beginning of reporting period (Monetary Only):	\$6,099.34
6	Itemized Contributions \$20 or More [CRS 1-45-108(1)(a)] (Please list on Schedule "A")	\$1,700.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$0.00
8	Loans Received (Please list on Schedule "C")	\$0.00
9	Total of Other Receipts (Interest, Dividends, etc.)	\$0.00
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$0.00
11	Total Monetary Contributions (Total of lines 6 through 10)	\$1,700.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$363.85
13	Total Contributions (Line 11 + line 12)	\$2,063.85
14	Itemized Expenditures \$20 or More [CRS 1-45-108(1)(a)] (Please list on Schedule "B")	\$6,779.61
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 and less)	\$0.00
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)	\$0.00
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$6,779.61
20	Total Monetary Expenditures (Line 18 + Line 19)	\$6,779.61

Schedule A - Itemized Contributions Statement (\$20 or mor

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

Full Name of Committee/Person: Committee to Elect Julia Marvin

Reporting Period Covered: 10/11/19

date

Through

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

Total Itemized Contributions:

PLEASE PRINT/TYPE

1	Date Accepted	4 Name (Last, First)	Dawiskiba, Sebastian
	10/11/19	5 Address:	1750 Wewatta Street, 829
2	Contribution Amount	6 City/State/Zip:	Denver, CO 80202
\$	15.00	7 Description	monetary contribution
3	Aggregate Amount*	8 Employer (if appli	cable, mandatory):
\$	40.00	9 Occupation (if app	licable, <u>mandatory</u>):
1	Date Accepted	4 Name (Last, First)	Yugel, Stephen
	10/12/19	5 Address:	5403 W. 96th Ave. #1317
2	Contribution Amount	6 City/State/Zip:	Westminster, CO 80020
\$	300.00	7 Description	monetary contribution
3	Aggregate Amount*	8 Employer (if appli	cable, mandatory): Neat Capital
\$	450.00	9 Occupation (if app	licable, <u>mandatory</u>): Software Developer
1	Date Accepted	4 Name (Last, First)	Koller, Tracy
	10/14/19	5 Address:	2345 Andrew Drive
2	10/14/19 Contribution Amount	5 Address: 6 City/State/Zip:	2345 Andrew Drive Superior, CO 80027
2		_	
	Contribution Amount	6 City/State/Zip:	Superior, CO 80027 monetary contribution
\$	Contribution Amount 60.00	6 City/State/Zip:7 Description8 Employer (if appli)	Superior, CO 80027 monetary contribution
3	Contribution Amount 60.00	6 City/State/Zip:7 Description8 Employer (if appli)	Superior, CO 80027 monetary contribution cable, mandatory):
3	Contribution Amount 60.00	6 City/State/Zip:7 Description8 Employer (if appli)	Superior, CO 80027 monetary contribution cable, mandatory): licable, mandatory):
3 \$	Contribution Amount 60.00 Aggregate Amount*	 6 City/State/Zip: 7 Description 8 Employer (if appli 9 Occupation (if app 	Superior, CO 80027 monetary contribution cable, mandatory): licable, mandatory):
3 \$	Contribution Amount 60.00 Aggregate Amount* Date Accepted	6 City/State/Zip: 7 Description 8 Employer (if appli 9 Occupation (if app 4 Name (Last, First)	Superior, CO 80027 monetary contribution cable, mandatory): licable, mandatory): Martinez, Leticia

3 Aggregate Amount*	8 Employer (if applicable, <u>mandatory</u>):	
\$	9 Occupation (if applicable, <u>mandatory</u>):	

		•		the following Colorado Constitutional cites: Cand nor Committee Art. XXVIII, Sec. 2(14).
	Sch	edule A - Itemized	l Contribution	as Statement (\$20 or more)
	Full Name	of Committee/Person:	: Committee to El	ect Julia Marvin
		Reporting Period Cov	vered:	10/11/19 Through
PL	EASE PRINT/TYPE	1		
1	Date Accepted	4 Name (Last, First):	Marvin, Craig	
	10/26/19	5 Address:	311 South Columb	ous
2	Contribution Amount	6 City/State/Zip:	Alexandria, VA 22	314
\$	25.00	7 Description		
3	Aggregate Amount*	8 Employer (if applicab	le, <u>mandatory</u>):	
\$		9 Occupation (if applica	able, mandatory):	
1	Date Accepted	4 Name (Last, First):	Apartment Associa	tion of Metro Denver
	10/11/19	5 Address:	7100 E Belleview	Ave
2	Contribution Amount	6 City/State/Zip:	Greenwood Village	e, CO 80111
\$	250.00	7 Description		
3	Aggregate Amount*	8 Employer (if applicab	le, <u>mandatory</u>):	
\$		9 Occupation (if applica	able, mandatory):	
1	Date Accepted	4 Name (Last, First):	United Food and C	Commercial Workers International Union
	10/23/19	5 Address:	1775 K St N.W.	
2	Contribution Amount	6 City/State/Zip:	Washington DC 20	0036
\$	1000.00	7 Description	monetary contribut	ion
3	Aggregate Amount*	8 Employer (if applicab	le, <u>mandatory</u>):	
\$		9 Occupation (if applica	able, mandatory):	
1	Data Apparet ad	A Nome (Least Einst)		
I	Date Accepted	4 Name (Last, First):		
		5 Address:		

Schedule B - Itemized Expenditures Statement (\$20 or more) $_{\rm [C.R.S.~1-45-108-(1)~(a)]}$

Full Name of Committee/Perso	Committee to El	ect Julia Marvin		
Re	porting Period Covered:	10/11/19 date Total Itemized Example 10/11/19	Through xpenditures:	10/29/19 date 6,779.61
PLEASE PRINT/TYPE				
1 <u>Date Expended</u> 10/15/19	4 Name (Last, First): Canva 5 Address: 6 City/State/Zip: 7 Purpose of Expenditure:	design		
10/16/19	4 Name (Last, First): Fedex 5 Address: 6 City/State/Zip: 7 Purpose of Expenditure:	printing		
10/21/19	4 Name (Last, First): Mission 5 Address:	n Control		
\$ 6609.92 3 Recipient is (optional):	6 City/State/Zip:			
Committee Non-Committee	7 Purpose of Expenditure:	_mailers		
	4 Name (Last, First): Office	Depot		
10/22/19 2 <u>Amount</u>	5 Address:			
	6 City/State/Zip:			
3 Recipient is (optional):				
Committee Non-Committee	7 Purpose of Expenditure:	office supplies		

Full Name of Committee/Pe	Committee to Elect Julia Marvin			
	Reporting Period Covered: 10/11/19 Through 1	0/29/19 date		
PLEASE PRINT/TYPE				
1 <u>Date Expended</u> 10/22/19	4 Name (Last, First): Office Depot			
2 Amount	5 Address:			
\$ 27.77	6 City/State/Zip:			
3 Recipient is (optional):				
Committee	7 Purpose of Expenditure: office supplies			
Non-Committee				
1 Data Evnandad	4 Nama (Leat First):			
1 <u>Date Expended</u>	4 Name (Last, First):			
2 Amount	5 Address:			
\$	6 City/State/Zip:			
3 <u>Recipient is (optional):</u>				
Committee	7 Purpose of Expenditure:			
Non-Committee				
1 <u>Date Expended</u>	4 Name (Last, First):			
2 Amount	5 Address:			
\$	6 City/State/Zip:			
3 Recipient is (optional):				
Committee	7 Purpose of Expenditure:			
Non-Committee				
1 <u>Date Expended</u>	4 Name (Last, First):			
2 Amount	5 Address:			
\$	6 City/State/Zip:			
3 Recipient is (optional):				
Committee	7 Purpose of Expenditure:			
Non-Committee				
I Non-Committee				

Schedule C - Loans

Full Name of Committee/Person: Committee to Elect Julia Marvin

Reporting Period Covered:

10/11/19

Through

10/29/19

te

LOANS - Loans Owed by the Committee

(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, Sec. 9(e)] Notwithstanding any other section of this article to the contrary, a candidate's candidate committee may receive a loan 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):			
Address:			_
City/State/Zip:			
Original Amount of Loan: \$		Interest Rate:	%
		Total of All Loans This Rep	orting
		Period:	\$0.00
Loan Amount Received This Reporting Period:		(Place on line 8 of D	etailed Summary Report)
Principal Amount Paid This Reporting Period:			
Interest Amount Paid This Reporting Period:			
Amount Repaid This Reporting Period: (Amount Repaid is sum of Principal & Interest entered on Detail Su	\$0.00 mmary)	Total Repayments Made: (Sum of Schedule C pages, Place)	\$0.00 se on line 16 of Detailed Summary)
Outstanding Balance:			
TERMS OF LOAN:			
	Date Loan Received		Due Date for Final Payment
<u>LIST ALL ENI</u>	OORSERS OR GUARA	NTORS OF THIS LOAN	
Full Name	Address,	City, St., Zip	Amount Guaranteed

Schedule D – Returned Expenditures & Contributions

Full Name of Committee/Person:	Committee to Elect Julia Marvin					
	Reporting Period Covered: 10/11/19 Through date date					
	Total Returned Contributions: \$ -					
	Total Returned Expenditures: \$ -					
(Previously repe	$\frac{\textbf{Returned Contributions}}{\textit{orted on Schedule }A-\textit{Contributions accepted and then returned to donors)}}$					
PLEASE PRINT/TYPE						
1 <u>Date Accepted</u> 4 Name (L	.ast, First):					
2 <u>Date Returned</u> 5 Address: 6 City/Sta						
3 Amount 7 Purpose:	<u> </u>					
1 <u>Date Accepted</u> 4 Name (L	ast, First):					
2 <u>Date Returned</u> 5 Address: 6 City/Sta						
3 Amount 7 Purpose:						
\$						
(Previously repor	Returned Expenditures (Previously reported on Schedule B – Expenditures returned or refunded to the committee) PLEASE PRINT/TYPE					
1 <u>Date Expended</u> 4 Name (L	.ast, First):					
2 <u>Date Returned</u> 5 Address: 6 City/Sta						
	nt (optional):					
1 <u>Date Expended</u> 4 Name (L	.ast, First):					
2 <u>Date Returned</u> 5 Address: 6 City/Sta						
	nt (optional):					

Statement of Non-Monetary Contributions

[Art. XXVIII, Sect. 2, (5) (a) (II) (III), Sect. 5, (3)] [C.R.S. 1-45-108 (1)]

run Name	Of Committee/Person: Committee to Elect Julia Marvin	
Repo	orting Period Covered: 10/11/19 Through	10/29/19
	date	date
	Total Itemized Expenditures:	\$363.85
PLEASE PRINT/TYPE		
1 <u>Date Provided</u>	4 Name (Last, First): Thornton Professional Firefighters Local 2376	
10/18/19	5 Address: P.O. Box 29426	
2 <u>Fair Market Value</u>	6 City/State/Zip: Thornton, CO 80229	
\$118.90	7 Description: flyer	
	8 Employer (if applicable, <u>mandatory</u>):	
3 Aggregate Amount	9 Occupation (if applicable, <u>mandatory</u>):	
	10 Check box if Coordinated with a Candidate/Candidate Committee or Political P	arty.*
1 <u>Date Provided</u>	4 Name (Last, First): Conservation Colorado Grassroots Action Fund	
10/28/19	5 Address: 1536 Wynkoop St Ste 510	
2 Fair Market Value	6 City/State/Zip: Denver, CO 80202	
\$244.95	7 Description: email and staff time	
	8 Employer (if applicable, <u>mandatory</u>):	
3 Aggregate Amount	9 Occupation (if applicable, <u>mandatory</u>):	
\$299.90	10 Check box if Coordinated with a Candidate/Candidate Committee or Political P	arty.*
1 Date Provided	4 Name (Last, First):	
	5 Address:	
2 Fair Market Value	6 City/State/Zip:	
	7 Description:	
	8 Employer (if applicable, <u>mandatory</u>):	
3 Aggregate Amount	9 Occupation (if applicable, <u>mandatory</u>):	
	Check box if Coordinated with a Candidate/Candidate Committee or Political P	arty.*
1 Date Provided	4 Name (Last, First):	
	5 Address:	
2 Fair Market Value	6 City/State/Zip:	
	7 Description:	
	8 Employer (if applicable, <u>mandatory</u>):	
3 Aggregate Amount	9 Occupation (if applicable, <u>mandatory</u>):	
7,7,7,111111111111111111111111111111111	10 Check box if Coordinated with a Candidate/Candidate Committee or Political P	artv.*
		<u></u>
1 Date Provided	4 Name (Last, First):	
	5 Address:	
2 Fair Market Value	6 City/State/Zip:	
	7 Description:	
	8 Employer (if applicable, mandatory):	
3 Aggregate Amount	9 Occupation (if applicable, <u>mandatory</u>):	
J Aggregate Amount	10 Check box if Coordinated with a Candidate/Candidate Committee or Political P	artv *
	10 Check box if Coordinated with a Candidate/Candidate Committee or Political P	arty.*

^{*} 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."