

Elections Division
 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



Space Below For Office Use Only

REPORT OF CONTRIBUTIONS AND EXPENDITURES

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

Full Name of Committee/Person:	Eric Garcia for City Council <small style="text-align: center;">As Shown on Registration</small>
Address of Committee/Person:	10181 Wyandott Cir N
City, State & Zip Code:	Thornton, CO 80260
Committee Type:	Candidate Committee
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)	\$6,159.79
2	Total Monetary Contributions (line 11)	\$1,875.00
3	Total of Monetary Contributions & Beginning Amount (line 1+ line 2)	\$8,034.79
4	Total Monetary Expenditures (line 19)	\$6,562.93
5	Funds on Hand at End of Reporting Period (monetary) (line 3 - line 4)	\$1,471.86

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:

Eric Garcia

Registered Agent's (Treasurer's) Signature:

Date:

11/3/23

Print Candidate Name:

Eric Garcia

Candidate's Signature:

Date:

11/3/23

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

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

Full Name of Committee/Person: Eric Garcia for City Council

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

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

Total Itemized Contributions: \$ 1,875.00

PLEASE PRINT/TYPE

1 <u>Date Accepted</u> 10/13/2023	4 Name (Last, First): <u>Consumer Fireworks SafetyAssn PAC</u>
2 <u>Contribution Amount</u> \$ 250.00	5 Address: <u>PO Box 1436</u>
3 <u>Aggregate Amount*</u> \$	6 City/State/Zip: <u>Tacoma, WA, 98401</u>
	7 Description: <u>check</u>
	8 Employer (if applicable, <u>mandatory</u>): _____
	9 Occupation (if applicable, <u>mandatory</u>): _____
1 <u>Date Accepted</u> 10/18/2023	4 Name (Last, First): <u>Thornton Professional Firefighters</u>
2 <u>Contribution Amount</u> \$ 800.00	5 Address: <u>PO Box 29426</u>
3 <u>Aggregate Amount*</u> \$	6 City/State/Zip: <u>Thornton, CO 80229</u>
	7 Description: <u>Check</u>
	8 Employer (if applicable, <u>mandatory</u>): _____
	9 Occupation (if applicable, <u>mandatory</u>): _____
1 <u>Date Accepted</u> 10/18/2023	4 Name (Last, First): <u>Beckler, Carol</u>
2 <u>Contribution Amount</u> \$ 25.00	5 Address: <u>9841 Pennsylvania Dr</u>
3 <u>Aggregate Amount*</u> \$	6 City/State/Zip: <u>Thornton, CO 80229</u>
	7 Description: <u>online</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 E. 6th Ave. Parkway</u>
3 <u>Aggregate Amount*</u> \$	6 City/State/Zip: <u>Denver, CO 80220</u>
	7 Description: <u>Credit card</u>
	8 Employer (if applicable, <u>mandatory</u>): <u>TPC</u>
	9 Occupation (if applicable, <u>mandatory</u>): <u>Consultant</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:

Eric Garcia for City Council

Reporting Period Covered:

10/13/23

Through

10/29/23

date

date

PLEASE PRINT/TYPE

1 <u>Date Accepted</u> 10/22/2023	4 Name (Last, First): <u>Thornton Professional Firefighters</u>
2 <u>Contribution Amount</u> \$ 700.00	5 Address: <u>PO Box 29426</u>
3 <u>Aggregate Amount*</u> \$ 1500.00	6 City/State/Zip: <u>Thornton, CO 80229</u>
	7 Description: <u>Check</u>
	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>): _____

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>): _____

* 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)

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

Full Name of Committee/Person: Eric Garcia for City Council

Reporting Period Covered:

10/13/23

date

Through

10/29/23

date

Total Itemized Expenditures:

6,562.93

PLEASE PRINT/TYPE

1 <u>Date Expended</u> 10/28/23	4 Name (Last, First): <u>Anedot</u>
2 <u>Amount</u> \$ <u>5.60</u>	5 Address: <u>555 Hilton Ave Suite 106</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: <u>Baton Rouge, LA 70808</u>
	7 Purpose of Expenditure: <u>Fundraising Expenses</u>

1 <u>Date Expended</u> 10/25/23	4 Name (Last, First): <u>Mittera Printing</u>
2 <u>Amount</u> \$ <u>543.00</u>	5 Address: <u>PO Box 850471</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: <u>Minneapolis, MN, 55484</u>
	7 Purpose of Expenditure: <u>Mail piece</u>

1 <u>Date Expended</u> 10/25/23	4 Name (Last, First): <u>Charity Meinhart Design</u>
2 <u>Amount</u> \$ <u>112.50</u>	5 Address: <u>754 Flower St</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: <u>Grand Junction, CO 81506</u>
	7 Purpose of Expenditure: <u>Creative design</u>

1 <u>Date Expended</u> 10/24/23	4 Name (Last, First): <u>Point Blank Political</u>
2 <u>Amount</u> \$ <u>275.12</u>	5 Address: <u>330 Crown Oak Center Dr</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: <u>Longwood, FL 32750</u>
	7 Purpose of Expenditure: <u>Text messaging</u>

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

Full Name of Committee/Person: Eric Garcia for City Council

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

PLEASE PRINT/TYPE

1 <u>Date Expended</u> 10/23/23	4 Name (Last, First): <u>Santiago's</u>
2 <u>Amount</u> \$ 27.73	5 Address: <u>1380 W 104th Ave</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: <u>Northglenn, CO 80234</u>
	7 Purpose of Expenditure: <u>Food for volunteers</u>

1 <u>Date Expended</u> 10/23/23	4 Name (Last, First): <u>Safeway</u>
2 <u>Amount</u> \$ 17.64	5 Address: <u>771 Thornton Pkwy</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: <u>Thornton, CO 80229</u>
	7 Purpose of Expenditure: <u>Food for volunteers</u>

1 <u>Date Expended</u> 10/19/23	4 Name (Last, First): <u>ACE Hardware</u>
2 <u>Amount</u> \$ 7.60	5 Address: <u>2800 W 104th Ave</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: <u>Denver, CO 80234</u>
	7 Purpose of Expenditure: <u>Campaign supplies</u>

1 <u>Date Expended</u> 10/18/23	4 Name (Last, First): <u>Home Depot</u>
2 <u>Amount</u> \$ 60.32	5 Address: <u>10003 Grant Street</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: <u>Thornton, CO 80229</u>
	7 Purpose of Expenditure: <u>Campaign Supplies</u>

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

Full Name of Committee/Person: Eric Garcia for City Council

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

PLEASE PRINT/TYPE

1 <u>Date Expended</u> 10/17/23	4 Name (Last, First): <u>Garcia, Hailey</u>
2 <u>Amount</u> \$ <u>100.00</u>	5 Address: <u>10181 Wyandot Cir North</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: <u>Thornton, CO 80260</u>
	7 Purpose of Expenditure: <u>Campaign help</u>

1 <u>Date Expended</u> 10/18/23	4 Name (Last, First): <u>Mittera Printing</u>
2 <u>Amount</u> \$ <u>3416.86</u>	5 Address: <u>PO Box 850471</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: <u>Minneapolis, MN, 55484</u>
	7 Purpose of Expenditure: <u>Mail piece</u>

1 <u>Date Expended</u> 10/24/23	4 Name (Last, First): <u>Mittera Printing</u>
2 <u>Amount</u> \$ <u>1996.56</u>	5 Address: <u>PO Box 850471</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 City/State/Zip: <u>Minneapolis, MN, 55484</u>
	7 Purpose of Expenditure: <u>Mail piece</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: _____

Schedule D – Returned Expenditures & Contributions

Full Name of Committee/Person: Eric Garcia for City Council

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

Total Returned Contributions: \$ -

Total Returned Expenditures: \$ -

Returned Contributions

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

PLEASE PRINT/TYPE

1 <u>Date Accepted</u>	4 Name (Last, First): NONE
2 <u>Date Returned</u>	5 Address: _____
3 <u>Amount</u>	6 City/State/Zip: _____
\$ 	7 Purpose: _____

1 <u>Date Accepted</u>	4 Name (Last, First): _____
2 <u>Date Returned</u>	5 Address: _____
3 <u>Amount</u>	6 City/State/Zip: _____
\$ 	7 Purpose: _____

Returned Expenditures

(Previously reported on Schedule B – Expenditures returned or refunded to the committee)

PLEASE PRINT/TYPE

1 <u>Date Expended</u>	4 Name (Last, First): _____
2 <u>Date Returned</u>	5 Address: _____
3 <u>Amount</u>	6 City/State/Zip: _____
\$ 	7 Comment (optional): _____

1 <u>Date Expended</u>	4 Name (Last, First): _____
2 <u>Date Returned</u>	5 Address: _____
3 <u>Amount</u>	6 City/State/Zip: _____
\$ 	7 Comment (optional): _____

Statement of Non-Monetary Contributions

[Art. XXVIII, Sect. 2, (5) (a) (II) (III), Sect. 5, (3)]

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

Full Name of Committee/Person: Eric Garcia for City Council

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

Total Itemized Expenditures: \$0.00

PLEASE PRINT/TYPE

1 <u>Date Provided</u>	4 Name (Last, First): NONE
2 <u>Fair Market Value</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>): _____
	10 <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party.*

1 <u>Date Provided</u>	4 Name (Last, First): _____
2 <u>Fair Market Value</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>): _____
	10 <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party.*

1 <u>Date Provided</u>	4 Name (Last, First): _____
2 <u>Fair Market Value</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>): _____
	10 <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party.*

1 <u>Date Provided</u>	4 Name (Last, First): _____
2 <u>Fair Market Value</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>): _____
	10 <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party.*

1 <u>Date Provided</u>	4 Name (Last, First): _____
2 <u>Fair Market Value</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>): _____
	10 <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party.*

* 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."