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CONDITIONALLY ACCEPTED Space Below For Office Use Only

MAR 25 2026

THORNTON CITY CLERK

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

<b>Full Name of Committee/Person:</b>	Friends of John Alge <small>As Shown on Registration</small>
<b>Address of Committee/Person:</b>	4187 E 95TH DR
<b>City, State &amp; Zip Code:</b>	Thornton CO 80229
<b>Committee Type:</b>	Candidate Committee
<b>Name and Address of Financial Institution:</b>	First Bank 3990 E 104TH Ave Thornton CO 80233

**SOS ID NUMBER (state and county committees ONLY):**

N/A

**Type of Report:**

**Regularly Scheduled Filing.**

120 days prior to the Election     30 days prior to the Election  
 90 days prior to the Election     15 days prior to the Election  
 60 days prior to the Election     30 days after the 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:**

11/30/2025 **Through** 3/23/2026  
date date

**Declared Total Spending** (if applicable): [Art. XXVIII, Sect. 4 (1)]

\$ N/A

		Totals Detailed Summary Page
1	<b>Funds on Hand at Beginning of Reporting Period</b> (monetary only)	\$4,425.87
2	<b>Total Monetary Contributions</b> (line 11)	\$0.00
3	<b>Total of Monetary Contributions &amp; Beginning Amount</b> (line 1+ line 2)	\$4,425.87
4	<b>Total Monetary Expenditures</b> (line 19)	\$4,425.87
5	<b>Funds on Hand at End of Reporting Period</b> (monetary) (line 3 - line 4)	\$0.00

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: John Alge

Registered Agent's (Treasurer's) Signature: John Alge Date: 3/24/2026

Print Candidate Name: John Alge

## DETAILED SUMMARY

**Full Name of Committee/Person:** Friends of John Alge

**Current Reporting Period:** 11/30/2025 **Through** 3/23/2026

<b>Funds on hand at the beginning of reporting period (Monetary Only):</b>		<b>\$4,425.87</b>
6	<b>Itemized Contributions \$20 or More [CRS 1-45-108(1)(a)]</b> (Please list on Schedule "A")	<b>\$0.00</b>
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	
8	<b>Loans Received</b> (Please list on Schedule "C")	<b>\$0.00</b>
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	<b>\$0.00</b>
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	<b>\$0.00</b>
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	<b>\$0.00</b>
13	<b>Total Contributions</b> (Line 11 + line 12)	<b>\$0.00</b>
14	<b>Itemized Expenditures \$20 or More [CRS 1-45-108(1)(a)]</b> (Please list on Schedule "B")	<b>\$216.00</b>
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 and less)	
16	<b>Loan Repayments Made</b> (Please list on Schedule "C")	<b>\$4,209.87</b>
17	<b>Returned Contributions (To Donor)</b> (Please list on Schedule "D")	<b>\$0.00</b>
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	<b>\$4,425.87</b>
20	<b>Total Monetary Expenditures</b> (Line 18 + Line 19)	<b>\$4,425.87</b>

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

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

Full Name of Committee/Person: Friends of John Alge

Reporting Period Covered:

11/30/2025

date

Through

3/23/2026

date

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

Total Itemized Contributions: \$

-

PLEASE PRINT/TYPE

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

\* 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)

**PLEASE PRINT/TYPE**

1 <u>Date Expended</u> 2/17/2026	4 <u>Name (Last, First)</u> First Bank	
2 <u>Amount</u> \$ 2.00	5 <u>Address:</u> 3990 E 104TH Ave	
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 <u>City/State/Zip:</u> Thornton CO 80233	
	7 <u>Purpose of Expenditure:</u> Card fee	
1 <u>Date Expended</u> 3/17/2026	4 <u>Name (Last, First)</u> First Bank	
2 <u>Amount</u> \$ 2.00	5 <u>Address:</u> 3990 E 104TH Ave	
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 <u>City/State/Zip:</u> Thornton CO 80233	
	7 <u>Purpose of Expenditure:</u> Card fee	
1 <u>Date Expended</u> 3/19/2026	4 <u>Name (Last, First)</u> Squarespace	
2 <u>Amount</u> \$ 192.00	5 <u>Address:</u> 8 Clarkson St	
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 <u>City/State/Zip:</u> New York NY 10014	
	7 <u>Purpose of Expenditure:</u> Website fee	
1 <u>Date Expended</u> 3/23/2026	4 <u>Name (Last, First)</u> Squarespace	
2 <u>Amount</u> \$ 20.00	5 <u>Address:</u> 8 Clarkson St	
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6 <u>City/State/Zip:</u> New York NY 10014	
	7 <u>Purpose of Expenditure:</u> Domain fee	



## Schedule D – Returned Expenditures & Contributions

**Full Name of Committee/Person:** Friends of John Alge

**Reporting Period Covered:** 11/30/2025 date **Through** 3/23/2026 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): _____ <small>Address.</small>
2 <u>Date Returned</u>	5 Address: _____
3 <u>Amount</u> \$ <span style="background-color: yellow; display: inline-block; width: 100px; height: 15px;"></span>	6 City/State/Zip: _____
	7 Purpose: _____

1 <u>Date Accepted</u>	4 Name (Last, First): _____ <small>Address.</small>
2 <u>Date Returned</u>	5 Address: _____
3 <u>Amount</u> \$ <span style="background-color: yellow; display: inline-block; width: 100px; height: 15px;"></span>	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): _____ <small>Address.</small>
2 <u>Date Returned</u>	5 Address: _____
3 <u>Amount</u> \$ <span style="background-color: yellow; display: inline-block; width: 100px; height: 15px;"></span>	6 City/State/Zip: _____
	7 Comment (optional): _____

1 <u>Date Expended</u>	4 Name (Last, First): _____ <small>Address.</small>
2 <u>Date Returned</u>	5 Address: _____
3 <u>Amount</u> \$ <span style="background-color: yellow; display: inline-block; width: 100px; height: 15px;"></span>	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:** Friends of John Alge

**Reporting Period Covered:** 11/30/2025  
date

**Through** 3/23/2026  
date

**Total Itemized Expenditures:** \$0.00

**PLEASE PRINT/TYPE**

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.*

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."