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

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### **CONDITIONALLY ACCEPTED** OCT 29 2021 THORNTON CITY CLERING Below For Office Use Only

# REPORT OF CONTRIBUTIONS AND EXPENDITURES

	(C.R.S. 1-45-108)		
Full Name of Committee/Person:	Friends of Angie Bedolla  As Shown on Registration		
Address of Committee/Person:	11659 Columbine Place		part.
ity, State & Zip Code: Thornton, CO 80602			
Committee Type:	Candidiate		
Name and Address of Financial Institution:		d Thomaton CO 9	20402
Ivame and Address of Financial Institution:	1st Bank 13600 Colorado Blv	u Thornton, CO o	00002
SOS ID NUMBER (state and cour	ty committees ONLY):		N/A
October 29, 2021 (Find December 2, 2021 (Since December 2, 2021 (Since December 2) (Since	NLY /	21 Municipal Ele	ction)
1 Funds on Hand at Beginning of Reporting	g Period (monetary only)		\$7,078.62
2 Total Monetary Contributions (line 11)		\$4,290.00	
3 Total of Monetary Contributions & Beginning Amount (line 1+ line 2)		\$11,368.62	
4 Total Monetary Expenditures (line 19) 5 Funds on Hand at End of Reporting Period	od (monetary) (line 3 - line 4)		\$10,838.03 \$530.59
J Funds on Hand at End of Reporting Fores	(monetary) (time 5 - fine 4)		\$330.39
The appropriate officer shall impose	a penalty of \$50 per day for each of Art. XXVIII Sect. 10 (2) (a)]	lay that a report is	s filed late.
Authorization (Must be completed by either the that to the best of my knowledge or belief all conform of membership dues transferred by a member Print Registered Agent's (Treasurer's) Name:  Registered Agent's (Treasurer's) Signature:	tributions received during this report	ing period, includin	d declare, under penalty of perjury, ag any contributions received in the
Print Candidate Name: Angis, Bedolla			
Candidate's Signature:		Date:	10/24/2021

# **DETAILED SUMMARY**

Full Name of Committee/Person:

Friends of Angie Bedolla

Current Reporting Period: 10/8/21 Through 10/24/21

unds on h	and at the beginning of reporting period (Monetary Only):	\$7,078.62
6	Itemized Contributions \$20 or More [CRS 1-45-108(1)(a)] (Please list on Schedule "A")	\$4,290.00
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)	\$4,290.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$0.00
13	<b>Total Contributions</b> (Line 11 + line 12)	\$4,290.00
14	Itemized Expenditures \$20 or More [CRS 1-45-108(1)(a)] (Please list on Schedule "B")	\$10,838.03
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)	\$10,838.03
20	Total Monetary Expenditures (Line 18 + Line 19)	\$10,838.03

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

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

Full Name of Committee/Person: Friends of Angie Bedolla

10/24/21 **Reporting Period Covered:** Through 10/8/21 date date

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

4,290.00 Total Itemized Contributions: \$

PLEASE PRINT/TYPE	
1 Date Accepted	4 Name (Last, First): Ehlers, Barry
10/13/2021	5 Address: PO Box 851
2 Contribution Amount	6 City/State/Zip: Croomfield, CO 80038
\$ 40.00	7 Description Credit
3 Aggregate Amount*	8 Employer (if applicable, mandatory):
\$ 40.00	9 Occupation (if applicable, mandatory):
1 Date Accepted	4 Name (Last, First): Occidential Petroleum
10/19/2021	5 Address: 1701 Pennsylvania Ave
2 <u>Contribution Amount</u>	6 City/State/Zip: Washington, DC
\$ 250.00	7 Description Check
3 Aggregate Amount*	8 Employer (if applicable, mandatory):
\$ 250.00	9 Occupation (if applicable, mandatory):
1 Date Accepted	4 Name (Last, First): Smith, Kevin
10/21/2021	5 Address: 4100 E Mississippi Ave Suite 500
2 <u>Contribution Amount</u>	6 City/State/Zip: Denver, CO 80602
\$ 2000.00	7 Description Online
3 Aggregate Amount*	8 Employer (if applicable, mandatory): Westside
\$ 2000.00	9 Occupation (if applicable, <u>mandatory</u> ): <u>Development</u>
1 Date Accepted	4 Name (Last, First): Kulmann, Dave
10/21/2021	5 Address: 14824 Fillmore Way
2 Contribution Amount	6 City/State/Zip: Thornton, CO 80602
\$ 250.00	7 Description Online
3 Aggregate Amount*	8 Employer (if applicable, mandatory): Ascend Strategies, LLC

<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).

Full Name of	Committee/Person:	Friends of Ang	ne Bedolla	
PLEASE PRINT/TYPE	Reporting Period Co	vered:	10/8/21 Throu	10/24/21 date
Date Accepted     10/23/2021      Contribution Amount	4 Name (Last, First): 5 Address: 6 City/State/Zip:	Kulmann, Dave  14824 Fillmore W Thornton, CO 806		
\$ 300.00  3 Aggregate Amount*  \$ 550.00	7 Description  8 Employer (if application)  9 Occupation (if application)	Check ble, mandatory):	Ascend Strategies, LLC	
1 <u>Date Accepted</u> 10/24/2021 2 <u>Contribution Amount</u> \$ 950.00 3 <u>Aggregate Amount*</u> \$ 1500.00	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if application) 9 Occupation (if application)		Ascend Strategies, LLC	
1 <u>Date Accepted</u> 10/22/2021 2 <u>Contribution Amount</u> \$ 500.00 3 <u>Aggregate Amount*</u> \$ 500.00	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if application of application) 9 Occupation (if application)	1701 JFK Blvd Philadelphia, PA 1 ble, mandatory):	Agency Corporation 9103	
Date Accepted      Contribution Amount     Aggregate Amount*  \$	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applica 9 Occupation (if applica			

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

Full Name of Committee/Person: Friends of Angie Bedolla				
F	Reporting Period Covered:	10/8/21 date  Total Itemized Exp	Through	10/24/21 date 10,838.03
PLEASE PRINT/TYPE  1 Date Expended 10/12/21 2 Amount \$ 530.00 3 Recipient is (optional):  Committee				
Non-Committee  1 Date Expended 10/14/21 2 Amount \$ 1.90 3 Recipient is (optional):  Committee	J 11441055	on Ave Suite 106 ouge, LA 70808 Fundraising Expenses		
Non-Committee		Strategies, LLC  Fillmore Way  n, CO 80602		
Committee Non-Committee  1 Date Expended 10/18/21 2 Amount \$ 499.95		Group  Gage St #100  CO 80602		
3 Recipient is (optional):  Committee  Non-Committee	7 Purpose of Expenditure:	Advertising		

Full Name of Committee/Person: Friends of Angie Bedolla			
	Reporting Period Covered: 10/8/21 Through 10/24/21 date		
PLEASE PRINT/TYPE			
1 <u>Date Expended</u> 10/21/21	4 Name (Last, First): Anedot		
2 Amount	5 Address: 555 Hilton Ave Suite 106		
\$ 80.60	6 City/State/Zip: Baton Rouge, LA 70808		
3 Recipient is (optional):			
Committee	7 Purpose of Expenditure: Fundrasing Expenses		
Non-Committee			
	Post Sallors LLC		
1 <u>Date Expended</u> 10/21/21	4 Name (Last, First): Best Sellers LLC		
2 Amount	5 Address: 313 Red Eagle Circle		
\$ 250.00	6 City/State/Zip: Ridgeland, MS 80221		
3 Recipient is (optional):			
Committee	7 Purpose of Expenditure: Advertising		
Non-Committee			
1 Date Expended	4 Name (Last, First): Mittera Group		
10/22/21	5 Address: 5000 Osage St #100		
2 Amount			
\$ 1145.80  3 Recipient is (optional):	6 City/State/Zip: Denver, CO 80602		
Committee	7 Purpose of Expenditure: Advertising		
	1 tupose of Experimente. 1 retroiting		
Non-Committee			
1 <u>Date Expended</u>	4 Name (Last, First): Mittera Group		
10/23/21 2 Amount	5 Address: 5000 Osage St #100		
\$ 2870.78	6 City/State/Zip: Denver, CO 80602		
3 Recipient is (optional):	o ony out of the state of the s		
Committee	7 Purpose of Expenditure: Advertising		
Non-Committee			
Non-Committee			

Full Name of Committee/	Person: Friends of Angie Bedolla
	Reporting Period Covered: 10/8/21 Through 10/24/21
PLEASE PRINT/TYPE	date date
1 <u>Date Expended</u>	4 Name (Last, First): Point Blank Consulting
10/24/21 2 <u>Amount</u>	5 Address: 330 Crown Oak Centre Dr
\$ 950.00  3 Recipient is (optional):	6 City/State/Zip: Longwood, FL 32750
Committee	7 Purpose of Expenditure: Advertising
Non-Committee	
1 Date Expended	4 Name (Last, First):
2 Amount	5 Address:
3 Recipient is (optional):	6 City/State/Zip:
Committee	7 Purpose of Expenditure:
Non-Committee	
1 Date Expended	4 Name (Last, First):
	5 Address:
2 Amount \$	6 City/State/Zip:
3 Recipient is (optional):	
Committee	7 Purpose of Expenditure:
Non-Committee	
1 Date Expended	4 Name (Last, First):
2 Amount	5 Address: 6 City/State/Zip:
3 Recipient is (optional):	o City/state/Zip.
Committee	7 Purpose of Expenditure:
Non-Committee	

### Schedule C - Loans

Full Name of Committee/Person: Friends of Angie Bedolla

**Reporting Period Covered:** 

10/8/21 date Through

10/24/21 date

### 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): NONE				
Address:				
City/State/Zip:				
Original Amount of Loan: \$			Interest Rate:	%
		Total of	All Loans This Re	porting
		Period:		\$0.00
			(Place on line 8 of De	etailed Summary Report)
Loan Amount Received This Reporting Period:				
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		payments Made:	\$0.00 e on line 16 of Detailed Summary)
(Amount Repaid is sum of Principal & Interest entered on Detail Su	mmary)	(Sum o	Schedule C pages, Plac	e on line 16 of Detailed Summary)
Outstanding Balance:				
TERMS OF LOAN:				
	Date Loan Received			Due Date for Final Payment
LIST ALL ENDOR	SERS OR GUARA	NTORS (	OF THIS LOAN	

Full Name	Address, City, St., Zip	Amount Guaranteed
	and the second s	

# Schedule D – Returned Expenditures & Contributions

Full Name of Commit	tee/Person: Friends of Angie Bedolla			
(Property of the PLEASE PRINT/TYPE  1 Date Accepted 2 Date Returned	Reporting Period Covered: 10/8/21 Through date  Total Returned Contributions: \$ -  Total Returned Expenditures: \$ -  Returned Contributions  eviously reported on Schedule A – Contributions accepted and then returned to donors)  4 Name (Last, First): NONE  5 Address: 6 City/State/Zip:			
\$ Amount	7 Purpose:			
1 Date Accepted 2 Date Returned 3 Amount \$	4 Name (Last, First):  5 Address:  6 City/State/Zip:  7 Purpose:			
(Pres	Returned Expenditures  (Previously reported on Schedule B – Expenditures returned or refunded to the committee)  PLEASE PRINT/TYPE.			
1 Date Expended 2 Date Returned 3 Amount \$	4 Name (Last, First):  5 Address: 6 City/State/Zip: 7 Comment (optional):			
1 Date Expended 2 Date Returned 3 Amount \$	4 Name (Last, First): 5 Address: 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 Angie Bedolla
Repo	rting Period Covered: 10/8/21 Through 10/24/21
1100	date
	Total Itemized Expenditures: \$0.00
PLEASE PRINT/TYP	
1 Date Provided	4 Name (Last, First): NONE
	5 Address:
2 Fair Market Value	6 City/State/Zip:
The second second	7 Description:
	8 Employer (if applicable, mandatory):
3 Aggregate Amount	9 Occupation (if applicable, mandatory):
	10 Check box if Coordinated with a Candidate/Candidate Committee or Political Party.*
1 Date Provided	4 Name (Last, First):
	5 Address:
2 Fair Market Value	6 City/State/Zip:
Mary Mary Street	7 Description:
	8 Employer (if applicable, mandatory):
3 Aggregate Amount	9 Occupation (if applicable, mandatory):
	10 Check box if Coordinated with a Candidate/Candidate Committee or Political Party.*
1 <u>Date Provided</u>	4 Name (Last, First):
	5 Address:
2 <u>Fair Market Value</u>	6 City/State/Zip:
	7 Description:
	8 Employer (if applicable, mandatory):
3 Aggregate Amount	9 Occupation (if applicable, mandatory): 10 Check box if Coordinated with a Candidate/Candidate Committee or Political Party.*
	10 Check box if Coordinated with a Candidate/Candidate Committee or Political Party.*
1 Data Baraidad	A Name (Last Eigh)
1 Date Provided	4 Name (Last, First):  5 Address:
2 Fair Market Value	6 City/State/Zip:
2 Pail Iviai KCL Value	7 Description:
	8 Employer (if applicable, mandatory):
3 Aggregate Amount	9 Occupation (if applicable, mandatory):
3 Aggregate Amount	10 Check box if Coordinated with a Candidate/Candidate Committee or Political Party.*
	The state of the second state of the state o
1 Date Provided	4 Name (Last, First):
200011011000	5 Address:
2 Fair Market Value	6 City/State/Zip:
	7 Description:
	8 Employer (if applicable, mandatory):
3 Aggregate Amount	9 Occupation (if applicable, mandatory):
	10 Check box if Coordinated with a Candidate/Candidate Committee or Political Party.*

<sup>\*</sup> 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."