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

Phone: (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 2010 Revised Reporting Forms

The Report of Contributions and Expenditures is a financial report required for all committees or parties that accept contributions or make expenditures to support or oppose a candidate or an initiative seeking access to the ballot and/or a referendum placed on the ballot by the general assembly. The report is comprised of 7 basic data entry pages along with several informational and instructional pages. The data entry forms consist of the Report of Contributions and Expenditures with the Detail Summary, Schedules A, B, C, D and the Statement of Non-Monetary Contributions. Completion of Schedules A, B, C, D and the Statement of Non-Monetary Contribution forms should be done prior to completion of the Report of Contributions and Expenditures and Detail Summary pages. Listed below are brief descriptions of what each data entry page accomplishes to help you complete and finalize this report.

Report of Contributions and Expenditures (page 1)

A summary page of the committee or party name, address, financial institution, registered agent and the contribution/expenditure totals for a specific reporting period with the **Detailed Summary page** (page 2) that summarizes totals for all other data entry forms. Complete this 2-page form last.

Schedule A

This form is used to report monetary contributions received by the committee or party that exceed \$19.99. (Money received into the committee/party.)

Schedule B

This form is used to report expenditures paid out by the committee or party that exceed \$19.99. (Money expended/paid out by the committee/party.)

Schedule C

This form details loans received and repaid by the committee/party. (Money received by committee from a financial institution and/or repayment of a loan to a financial institution.)

Schedule D

This form allows the committee/party to account for either a contribution or expenditure that has been made and is being returned to the committee/party.

Statement of Non-Monetary Contributions

This form details contributions received that are tangible and can be assessed a fair market value. Expenditures on behalf of a candidate that are coordinated with or controlled by the candidate, candidate's agent or the political party shall be counted as a contribution to and expenditure by the candidate committee or the political party.

The Report of Contributions and Expenditures MUST be received by the appropriate officer on or before the due date. Postmark dates are not recognized. A faxed report MUST be followed up with the original document within seven calendar days. The candidate and/or registered agent are responsible for the content and accuracy of the report.

Municipal committees should contact their municipal/town clerk for assistance.

Instructions for

REPORT OF CONTRIBUTIONS AND EXPENDITURES DETAILED SUMMARY

Reference Colorado Revised Statute: 1-45-108, C.R.S.
Who uses this form? All Committees

Purpose of form: This form is used to summarize the information from all other forms.

Is this form required? Yes

When do I file this form? This form must be received by the designated election official on or

before the filing due date for the reporting period. Postmarks are not

accepted.

COMPLETING THE FORM

This form uses information contained on other forms; all other applicable forms must be completed prior to filing this summary form.

- STEP 1. Completely fill out the Report of Contributions and Expenditures page until you reach Line 1.
 - Print or type the full name of the committee
 - Print or type the address of your committee. Print or type the city, state and zip code of your committee.
 - Print or type the name of the financial institution where the committee funds are deposited. [1-45-108(1)(a)(IV)(b), C.R.S.]
 - Print or type the address of the financial institution including city, state and zip code.
 - Determine what type of report is being filed.
 - Regularly Scheduled Filings are normal reporting periods as required in 1-45-108 & 1-45-109, C.R.S. (These dates are available through the Campaign and Political Finance manual, your local election official, the calendars provided and the Secretary of State web site www.sos.state.co.us)
 - Amended Filings are reports that correct a previously filed report.
 - Termination Reports are filings that close a committee, indicating the committee is no longer
 in existence. You must report a zero balance on line #5. (Art. XXVIII, Sec. 2(3), 1-45-106,
 C.R.S., and the Rules Concerning Campaign and Political Finance 3.3)
 - Check (
) the appropriate box next to the type of report filed. If this report is an amended filing, print or type the date of the originally filed report being amended.
 - Print or type the Reporting Period being covered. (The beginning and ending dates)
- STEP 2. Skip Lines 1-5 and the Authorization portion of the Report of Contributions and Expenditures page (page 1) and go to the Detailed Summary page (page 2).
- STEP 3. On the Detail Summary page of the Report of Contributions and Expenditures form completely fill out the header information and lines 6 through 20.
 - Line #6 Enter the total amount from Schedule A.

- Line #7 Enter the total amount of contributions received this reporting period that were \$19.99 or less.
- Line #8 Enter the total amount of all loans received this reporting period. (Schedule C)
- Line #9 Enter the total amount of all other receipts. (Example: Interest, Dividends)
- Line #10 Enter the total amount of all expenditures returned or refunded to the committee. (Schedule D - money coming back to the committee).
- Line #11 Enter the sum of Lines #6 through #10.
- Line #12 Enter the total amount of all Non-Monetary Contributions from the Statement of Non-Monetary Contributions form.
- Line #13 Enter the sum of Line #11 and #12.
- Line #14 Enter the total amount from Schedule B.
- Line #15 Enter the total amount of all Expenditures \$19.99 or less.
- Line #16 Enter the total amount of all loan payments paid this reporting period.
 (Schedule C)
- Line #17 Enter the total amount of contributions returned to the donor. Example: A contributor exceeded contribution limits and the amount exceeding that limit must be returned. (Schedule D money going out of the committee).
- Line #18 Enter the total amount of expenditures by a third party that are controlled by or coordinated with a candidate, candidate committee or political party. (Statement of Non-Monetary Contribution form)
- Line #19 Enter the sum of Lines #14 through #17.
- Line #20 Enter the sum of lines #18 and #19. [Art. XXVIII, Sec. 5(3)]
- STEP 4. Return to the Report of Contributions and Expenditures form and complete Lines 1-5.
 - Line #1 If this is your first Report of Contributions and Expenditures as a committee enter zero (0). If you have previously filed enter the ending balance from line #5 of your most recently filed report.
 - ➤ Line #2 Enter the total amount from Line #11.
 - Line #3 Enter the sum of Lines #1 and #2.
 - Line #4 Enter the total amount from Line #19.
 - Line #5 Enter the difference of Line #3 minus Line #4.
- STEP 5. Complete the Authorization portion of the Report of Contributions and Expenditures form by printing the name of the registered agent and then sign and date the report.

Space Below For Office Use Only

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

www.sos.state.co.us



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:	1659 Columbine Pl			
City, State & Zip Code:	Thornton, CO 80223			
Committee Type:	Candidate Committee			
Name and Address of Financial Institution:	1st Bank, 13600 Colorado Blvd.			
				
SOS ID NUMBER (state and count	y committees ONLY):		N/A	
Type of Report:				
Regularly Scheduled Filing.				
	days prior to the November 7, 202	23 Municipal Elec	etion)	
November 3, 2023 (F	riday prior to the November 7, 202	23 Municipal Elec	tion)	
	35 days after the November 7, 202	•		
	s from prior election held on		1011)	
	•			
Amended Filing. This amends previous Submit changes or new information ON				
Termination Report (Termination R		- in I in - 5)		
		1		
Reporting Period Covered:	1/25/23	Through	10/17/23	
Declared Total Spending (if applicable): [Art.	date]	date	
XXVIII, Sect. 4 (1)]	\$ N/A			
			Totals Detailed Summary Page	
1 Funds on Hand at Beginning of Reporting	Period (monetary only)		\$0.00	
2 Total Monetary Contributions (line 11)			\$21,300.00	
3 Total of Monetary Contributions & Beginn	ing Amount (line 1+ line 2)		\$21,300.00	
4 Total Monetary Expenditures (line 19)			\$14,472.79	
5 Funds on Hand at End of Reporting Period	(monetary) (line 3 - line 4)		\$6,827.21	
The appropriate officer shall impose	a penalty of \$50 per day for each d	ay that a report is	filed late.	
	Art. XXVIII Sect. 10 (2) (a)]			
Authorization (Must be completed by either the Ro		•		
to the best of my knowledge or belief all contribution			ontributions received in the form of	
membership dues transferred by a membership orga	anization, are from permissible source	S.		
Print Registered Agent's (Treasurer's) Name:				
Registered Agent's (Treasurer's) Signature:		Date:		
Print Candidate Name: Angie Bedolla				
-				

DocuSign Envelope ID: 36D7	7876 ^D 2642 2014 7 25-A092-2AAF4D9E970C	
Candidate's Signature:	DIEFFIDSF4A3471	Date: 10/17/2023

DETAILED SUMMARY

Full Name of Committee/Person: Friends of Angie Bedolla

1/25/23 10/17/23 **Current Reporting Period: Through** Funds on hand at the beginning of reporting period (Monetary Only): **Itemized Contributions \$20 or More** [CRS 1-45-108(1)(a)] 6 (Please list on Schedule "A") \$21,300.00 **Total of Non-Itemized Contributions** 7 (Contributions of \$19.99 and Less) **Loans Received** 8 (Please list on Schedule "C") \$0.00 **Total of Other Receipts** 9 (Interest, Dividends, etc.) **Returned Expenditures (from recipient)** 10 (Please list on Schedule "D") \$0.00 **Total Monetary Contributions** 11 (Total of lines 6 through 10) \$21,300.00 **Total Non-Monetary Contributions** 12 (From Statement of Non-Monetary Contributions) \$0.00 **Total Contributions** 13 (Line 11 + line 12) \$21,300.00 Itemized Expenditures \$20 or More [CRS 1-45-108(1)(a)] 14 (Please list on Schedule "B") \$14,472.79 **Total of Non-Itemized Expenditures** 15 (Expenditures of \$19.99 and less) Loan Repayments Made 16 (Please list on Schedule "C") \$0.00 **Returned Contributions (To Donor)** 17 (Please list on Schedule "D") \$0.00 **Total Coordinated Non-Monetary Expenditures** 18 (Candidate/Candidate Committee & Political Parties only) **Total Monetary Expenditures** 19 (Total of lines 14 through 17) \$14,472.79 **Total Monetary Expenditures** 20 (Line 18 + Line 19)

\$14,472.79

Schedule A Instructions

NOTE: In addition to the reporting requirements of 1-45-108, C.R.S., please note provisions for specific Committee type, as follows:

Candidate, Issue, Political Party and Political Committee (PC)

 Required to disclose occupation and employer for all \$100 or more contributions made by natural persons. (Art. XXVIII, Sec. 7)

Small Donor Committee

Accepts contributions of no more than \$50 per year, <u>FROM NATURAL PERSONS ONLY</u>.
 [Art. XXVIII, Sec. 2(14)(a)]

PROHIBITED CONTRIBUTIONS

[Art. XXVIII, Sec.3 & C.R.S. 1-45-105.5]

- No candidate's candidate committee shall accept contributions from, or make contributions to, another candidate committee.
- No person shall act as a conduit for a contribution to a candidate committee.
- No candidate committee, political committee, small donor committee, or political party shall knowingly accept contributions from:
 - (a) Any natural person who is not a citizen of the United States;
 - (b) A foreign government; or
 - (c) any foreign corporation that does not have the authority to transact business in this state pursuant to article 115 of title 7, C.R.S., or any successor section.
- No candidate committee, political committee, small donor committee, issue committee, or political
 party shall accept a contribution, or make an expenditure, in currency or coin exceeding one
 hundred dollars.
- No person shall make a contribution to a candidate committee, issue committee, political
 committee, small donor committee, or political party with the expectation that some or all of the
 amounts of such contribution will be reimbursed by another person. No person shall be reimbursed
 for a contribution made to any candidate committee, issue committee, political committee, small
 donor committee, or political party, nor shall any person make such reimbursement except as
 provided in subsection (8) of this section. [Art. XXVIII, Sec. 3(8)]

Please refer to Article XXVIII, Section 3 of the Colorado Constitution for complete prohibited contributions.

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

Full Name of Committee/Person: Friends of Angie Bedolla

Reporting Period Covered: 1/25/23 Through 10/17/23
date date

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

Total Itemized Contributions: \$ 21,300.00

PLEASE PRINT/TYPE

			Bedolla, Angie	
1	Date Accepted	4 Name (Last, First):	Deciona, ringic	
	1/25/2023	5 Address:	11659 Columbine Pl	
2	Contribution Amount	6 City/State/Zip:	Thornton CO 80233	
\$	40.00	7 Description	Initial account deposit	it
3	Aggregate Amount*	8 Employer (if applicat	ole, <u>mandatory</u>):	
\$	40.00	9 Occupation (if applic	able, <u>mandatory</u>):	
1	Date Accepted	4 Name (Last, First):	Sandgren, Jessica	
	2/2/2023	5 Address:	10533 Garfield St	
2	Contribution Amount	6 City/State/Zip:	Thornton CO 80233	
\$	50.00	7 Description	(Check
3	Aggregate Amount*	8 Employer (if applicat	ole, <u>mandatory</u>):	
\$	50.00	9 Occupation (if applic	able, <u>mandatory</u>):	
1	Date Accepted	4 Name (Last, First):	Matkosky, Nicole	
1	Date Accepted 2/2/2023	4 Name (Last, First): 5 Address:	Matkosky, Nicole 13352 Franklin St	
1 2				
	2/2/2023	5 Address:	13352 Franklin St	
2	2/2/2023 Contribution Amount	5 Address: 6 City/State/Zip:	13352 Franklin St Thornton CO 80241 Check	
2 \$	2/2/2023 Contribution Amount 50.00	5 Address:6 City/State/Zip:7 Description	13352 Franklin St Thornton CO 80241 Check ole, mandatory):	
2 \$	2/2/2023 Contribution Amount 50.00 Aggregate Amount*	5 Address:6 City/State/Zip:7 Description8 Employer (if applicate	13352 Franklin St Thornton CO 80241 Check ole, mandatory):	
2 \$ 3 \$	2/2/2023 Contribution Amount 50.00 Aggregate Amount* 50.00	 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicates) 9 Occupation (if applicates) 	13352 Franklin St Thornton CO 80241 Check ole, mandatory): able, mandatory):	
2 \$ 3 \$	2/2/2023 Contribution Amount 50.00 Aggregate Amount* 50.00 Date Accepted	5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicate 9 Occupation (if applicate 4 Name (Last, First):	13352 Franklin St Thornton CO 80241 Check ble, mandatory): able, mandatory): Unrein, Anthony	
2 \$ 3 \$ 1	2/2/2023 Contribution Amount 50.00 Aggregate Amount* 50.00 Date Accepted 2/2/2023	5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicate 9 Occupation (if applicate 4 Name (Last, First): 5 Address: 6 City/State/Zip:	13352 Franklin St Thornton CO 80241 Check ole, mandatory): able, mandatory): Unrein, Anthony 8011 E 148th Dr Thornton CO 80602	
2 \$ 3 \$	2/2/2023 Contribution Amount 50.00 Aggregate Amount* 50.00 Date Accepted 2/2/2023 Contribution Amount	5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicate 9 Occupation (if applicate 4 Name (Last, First): 5 Address: 6 City/State/Zip:	13352 Franklin St Thornton CO 80241 Check ble, mandatory): able, mandatory): Unrein, Anthony 8011 E 148th Dr Thornton CO 80602 Check	NA

^{*} 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 Angie Bedolla

Reporting Period Covered: 1/25/23 Through 10/17/23 date date PLEASE PRINT/TYPE Carlson, Ryan 1 Date Accepted 4 Name (Last, First): 2/2/2023 5 Address: 12460 East Ct. PO Box 247 2 Contribution Amount 6 City/State/Zip: Thornton CO 80641 250.00 7 Description Check 8 Employer (if applicable, <u>mandatory</u>): Aggregate Amount* Carlson Associates 9 Occupation (if applicable, mandatory): 250.00 Vice President Thornton Professional Firefighters Local #2376 Political Action Funds 1 Date Accepted 4 Name (Last, First): 2/8/2023 Address: PO Box 29426 Contribution Amount 6 City/State/Zip: Thornton CO 80229 1000.00 7 Description Check Aggregate Amount* 8 Employer (if applicable, mandatory): NA 1000.00 9 Occupation (if applicable, <u>mandatory</u>): NA Jaramillo, Chris 1 Date Accepted 4 Name (Last, First): 2/9/2023 Address: 3901 E 112th Ave 2 Contribution Amount 6 City/State/Zip: Thornton CO 80233 250.00 7 Description Electronic donation 8 Employer (if applicable, mandatory): Aggregate Amount* State Farm Insurance \$ 250.00 9 Occupation (if applicable, mandatory): Insurance Agent Harris, Tanya 4 Name (Last, First): 1 Date Accepted 2/9/2023 Address: 11654 Columbine Pl 2 Contribution Amount 6 City/State/Zip: Thornton CO 80233 200.00 7 Description Electronic donation 8 Employer (if applicable, mandatory): Aggregate Amount* NA 200.00 9 Occupation (if applicable, <u>mandatory</u>): Student

^{*} 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 Angie Bedolla				
PLEASE PRINT/TYPE	Reporting Period Cov	vered:	1/25/23 date	Through	10/17/23 date	
1 Date Accepted 2/9/2023 2 Contribution Amount \$ 55.00 3 Aggregate Amount*	 4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applical) 	Garcia, Eric 10181 Wyandott C Thornton CO 8026 Electronic donation ole, mandatory):	0			
\$ 55.00	9 Occupation (if applic	able, <u>mandatory</u>):				
1 Date Accepted 2/9/2023 2 Contribution Amount \$ 100.00	4 Name (Last, First):5 Address:6 City/State/Zip:7 Description	Osborn, Robert 2843 Breezy Lane Castle Rock CO 80 Electronic donation				
3 Aggregate Amount* \$ 100.00	8 Employer (if applical 9 Occupation (if applic	-	CORE Electric Coop Business Developme			
1 Date Accepted 2/10/2023 2 Contribution Amount \$ 250.00 3 Aggregate Amount* \$ 250.00	 4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applical) 9 Occupation (if applical) 	•		of Commerce		
1 <u>Date Accepted</u> 2/10/2023 2 <u>Contribution Amount</u> \$ 25.00 3 <u>Aggregate Amount*</u> \$ 25.00	 4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicated) 9 Occupation (if applicated) 	-	80022			

^{*} 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 Committ	ee/Person:	Friends of Ang	ie Bedolia		
	Reporting Period Cov	vered:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE 1 Date Accepted 2/25/2023 2 Contribution Amount \$ 200.00 3 Aggregate Amount* \$ 200.00	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applical) 9 Occupation (if applical)	-	•		
1 Date Accepted 3/5/2023 2 Contribution Amount \$ 250.00 3 Aggregate Amount* \$ 250.00	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicated) 9 Occupation (if applicated)	-		ler	
1 Date Accepted 2 Contribution Amount \$ 3 Aggregate Amount*	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applical 9 Occupation (if applical	•			
1 Date Accepted 3/31/2023 2 Contribution Amount \$ 50.00 3 Aggregate Amount* \$ 50.00	 4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicated) 9 Occupation (if applicated) 	-			

^{*} 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 Angie Bedolla Through **Reporting Period Covered:** 1/25/23 10/17/23 PLEASE PRINT/TYPE McGowne, Chris 4 Name (Last, First): 1 Date Accepted 4/6/2023 Address: 1903D E 24th, Dr 6 City/State/Zip: Hays KS 67601 2 Contribution Amount 50.00 7 Description Electronic donation Employer (if applicable, mandatory): Aggregate Amount* 50.00 9 Occupation (if applicable, mandatory): Dean, Richard 1 Date Accepted 4 Name (Last, First): 4/11/2023 Address: 1842 Montane Dr East 6 City/State/Zip: Golden CO 80401 2 Contribution Amount 250.00 7 Description Electronic donation Aggregate Amount* Employer (if applicable, <u>mandatory</u>): **Stratus Companies** 9 Occupation (if applicable, mandatory): 250.00 Founder Clutter, Aaron 1 Date Accepted 4 Name (Last, First): 4/13/2023 Address: 7200 South Alton Way 2 Contribution Amount 6 City/State/Zip: Centennial CO 80112 100.00 7 Description Electronic donation 8 Employer (if applicable, mandatory): 3 Aggregate Amount* JR Engineering 9 Occupation (if applicable, mandatory): 100.00 Principal and President Faraci, Christena 4 Name (Last, First): 1 Date Accepted 4/13/2023 Address: 242 S Forest St 2 Contribution Amount 6 City/State/Zip: Denver CO 80246 100.00 7 Description Electronic donation Aggregate Amount* 8 Employer (if applicable, <u>mandatory</u>): Faraci Government Relations 9 Occupation (if applicable, <u>mandatory</u>): 100.00 President

^{*} 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 Angie Bedolla **Through Reporting Period Covered:** 1/25/23 10/17/23 PLEASE PRINT/TYPE Carlson, Blake 4 Name (Last, First): 1 Date Accepted 4/14/2023 Address: 14570 Clay St 6 City/State/Zip: Broomfield CO 80023 2 Contribution Amount 1000.00 7 Description Electronic donation Employer (if applicable, mandatory): Aggregate Amount* Carlson Land Development 1000.00 9 Occupation (if applicable, mandatory): Investor Carlson, Tyler 4 Name (Last, First): 1 Date Accepted 4/14/2023 Address: 1873 S Bellaire St 6 City/State/Zip: 2 Contribution Amount Denver CO 80222 500.00 Description Electronic donation Aggregate Amount* Employer (if applicable, <u>mandatory</u>): Evergreen Devco 9 Occupation (if applicable, mandatory): 500.00 Managing Principal Beckwitt, Jonathan 1 Date Accepted 4 Name (Last, First): 4/14/2023 Address: 584 S Gilpin St Contribution Amount 6 City/State/Zip: Denver CO 80209 100.00 7 Description Electronic donation 8 Employer (if applicable, mandatory): 3 Aggregate Amount* Lennar 9 Occupation (if applicable, mandatory): 100.00 Senior Land Acquisition Manager Hogan, Teresa 4 Name (Last, First): 1 Date Accepted 4/15/2023 Address: 14686 Fillmore Ct 2 Contribution Amount 6 City/State/Zip: Brighton CO 80602 375.00 7 Description Electronic donation Aggregate Amount* 8 Employer (if applicable, <u>mandatory</u>): LJA Engineering 9 Occupation (if applicable, <u>mandatory</u>): 375.00 Senior Vice President

^{*} 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 Angie Bedolla			
	Reporting Period Cov	vered:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE					
1 <u>Date Accepted</u>	4 Name (Last, First):	Wiegert, Jim			
4/15/2023	5 Address:	5407 Ledgerstone	Dr		
2 <u>Contribution Amount</u>	6 City/State/Zip:	Dallas TX 75214			
\$ 375.00	7 Description	Electronic donation	n		
3 Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):	LJA Engineering		
\$ 375.00	9 Occupation (if applic	cable, <u>mandatory</u>):	Senior Vice President		
1 <u>Date Accepted</u>	4 Name (Last, First):	McGeady, Maryar	nn		
4/17/2023	5 Address:	15 Pinyon Pine Ro	ad		
2 <u>Contribution Amount</u>	6 City/State/Zip:	Littleton CO 8012	7		
\$ <mark>250.00</mark>	7 Description	Electronic donation	n		
3 Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):	McGeady Becher P.C.		
\$ 250.00	9 Occupation (if applic	cable, <u>mandatory</u>):	Founding Member		
1 <u>Date Accepted</u>	4 Name (Last, First):	Henry, Karen			
4/17/2023	5 Address:	1501 Wazee Stree	t 1-C		
2 <u>Contribution Amount</u>	6 City/State/Zip:	Denver CO 80202			
\$ 50.00	7 Description	Electronic donation	n		
3 Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):			
\$ 50.00	9 Occupation (if applic	able, <u>mandatory</u>):			
1 <u>Date Accepted</u>	4 Name (Last, First):	Eicher, Craig			
4/21/2023	5 Address:	5 Kenwood Pl			
2 <u>Contribution Amount</u>	6 City/State/Zip:	Golden CO 80403			
\$ 25.00	7 Description	Electronic donation	n		
3 Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):			
\$ 25.00	9 Occupation (if applic	eable, <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).

Full Name of Committee/Person: Friends of Angie Bedolla **Through Reporting Period Covered:** 1/25/23 10/17/23 PLEASE PRINT/TYPE Wright, Earl 4 Name (Last, First): 1 Date Accepted 4/21/2023 Address: 6296 Greenwood Plaza Blvd 6 City/State/Zip: Greenwood Village CO 80111 2 Contribution Amount 250.00 7 Description Electronic donation Employer (if applicable, mandatory): Aggregate Amount* **AMG National Trust Bank** 250.00 9 Occupation (if applicable, mandatory): Chairman Brophy, Gregory 1 <u>Date Accepted</u> 4 Name (Last, First): 4/21/2023 Address: PO Box 332 6 City/State/Zip: 2 Contribution Amount Wray CO 80758 100.00 7 Description Electronic donation Aggregate Amount* Employer (if applicable, <u>mandatory</u>): **Brophy Strategies LLC** 100.00 9 Occupation (if applicable, mandatory): President Carlson, Clarke 1 Date Accepted 4 Name (Last, First): 4/21/2023 Address: PO Box 247 Contribution Amount 6 City/State/Zip: Thornton CO 80614 1000.00 7 Description Check 8 Employer (if applicable, mandatory): 3 Aggregate Amount* Calrson Associates 9 Occupation (if applicable, mandatory): 1000.00 Owner Jumps, Brian 4 Name (Last, First): 1 Date Accepted 4/24/2023 Address: 5025 Lakeshore Dr 2 Contribution Amount 6 City/State/Zip: Bow Mar CO 80123 250.00 7 Description Electronic donation Aggregate Amount* 8 Employer (if applicable, <u>mandatory</u>): Jumps Law LLC 9 Occupation (if applicable, <u>mandatory</u>): 250.00 Attorney

^{*} 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).

Friends of Angie Bedolla **Full Name of Committee/Person: Reporting Period Covered:** 1/25/23 Through 10/17/23 date date PLEASE PRINT/TYPE Rael, Diana 1 Date Accepted 4 Name (Last, First): 4/25/2023 5 Address: 1101 Bannock St 6 City/State/Zip: Denver CO 80204 2 Contribution Amount 500.00 7 Description Electronic donation Aggregate Amount* 8 Employer (if applicable, <u>mandatory</u>): Norris Design 500.00 9 Occupation (if applicable, mandatory): Principal Leprino, Laura 1 Date Accepted 4 Name (Last, First): 5/15/2023 Address: 2640 E Cedar Ave Contribution Amount 6 City/State/Zip: Denver CO 80209 250.00 7 Description Electronic donation 8 Employer (if applicable, mandatory): Aggregate Amount* Leprino Foods 250.00 9 Occupation (if applicable, <u>mandatory</u>): Co-Owner Carlson, Kent 1 Date Accepted 4 Name (Last, First): 5/18/2023 Address: 12460 1st St PO Box 247 2 Contribution Amount 6 City/State/Zip: Thornton CO 80614 1000.00 7 Description Check 8 Employer (if applicable, mandatory): Aggregate Amount* Carlson Associates 1000.00 9 Occupation (if applicable, mandatory): Principal Klein, Andy 4 Name (Last, First): 1 Date Accepted 5/24/2023 Address: 4100 E Mississippi Ave 2 Contribution Amount 6 City/State/Zip: Denver CO 80246 500.00 7 Description Electronic donation 8 Employer (if applicable, mandatory): Aggregate Amount* Westside Investments 500.00 9 Occupation (if applicable, <u>mandatory</u>): Partner

^{*} 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:

Reporting Period Covered:

1/25/23 Through 10/17/23 date

	EASE PRINT/TYPE				
1	Date Accepted	4 Name (Last, First):	Perlmutter, Jonath	nan	
	6/1/2023	5 Address:	1601 Blake St Sui	te 600	
2	Contribution Amount	6 City/State/Zip:	Denver CO 80202		
\$	250.00	7 Description	Electronic donatio	n	
3	Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):	Jordon Perlmutter & Co.	
\$	250.00	9 Occupation (if applic	eable, <u>mandatory</u>):	Principal	
1	Date Accepted	4 Name (Last, First):	Thornton Profession	onal Firefighters Local #2376 Political Action Funds	
	6/1/2023	5 Address:	PO Box 29426		
2	Contribution Amount	6 City/State/Zip:	Thornton CO 8022	29	
\$	750.00	7 Description	Check		
3	Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):	NA	
\$	1750.00	9 Occupation (if applic	eable, <u>mandatory</u>):	NA	
1	Date Accepted	4 Name (Last, First):	Howes, Christoph	er	
	6/2/2023	5 Address:	1580 Lincoln St		
2	6/2/2023 Contribution Amount	5 Address:6 City/State/Zip:	1580 Lincoln St Denver CO 80203		
2					
	Contribution Amount	6 City/State/Zip:	Denver CO 80203 Electronic donatio		
\$	Contribution Amount 250.00	6 City/State/Zip:7 Description	Denver CO 80203 Electronic donation ole, mandatory):	n	
\$	Contribution Amount 250.00 Aggregate Amount*	6 City/State/Zip:7 Description8 Employer (if applical	Denver CO 80203 Electronic donation ole, mandatory):	Howes Wolf	
3 \$	Contribution Amount 250.00 Aggregate Amount* 250.00	 6 City/State/Zip: 7 Description 8 Employer (if applicated) 9 Occupation (if applicated) 	Denver CO 80203 Electronic donation on the color of the	Howes Wolf Partner	
3 \$	Contribution Amount 250.00 Aggregate Amount* 250.00 Date Accepted 6/22/2023	 6 City/State/Zip: 7 Description 8 Employer (if applicate) 9 Occupation (if applicate) 4 Name (Last, First): 	Denver CO 80203 Electronic donation of the control	Howes Wolf Partner	
\$ 3 \$	Contribution Amount 250.00 Aggregate Amount* 250.00 Date Accepted 6/22/2023	 6 City/State/Zip: 7 Description 8 Employer (if applicated) 9 Occupation (if applicated) 4 Name (Last, First): 5 Address: 	Denver CO 80203 Electronic donation on the color of the	Howes Wolf Partner ne e CO 80121	
\$ 3 \$ 1	Contribution Amount 250.00 Aggregate Amount* 250.00 Date Accepted 6/22/2023 Contribution Amount	 6 City/State/Zip: 7 Description 8 Employer (if applicated) 9 Occupation (if applicated) 4 Name (Last, First): 5 Address: 6 City/State/Zip: 	Denver CO 80203 Electronic donation on the color of the	Howes Wolf Partner ne e CO 80121	

^{*} 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 Angie Bedolla Through **Reporting Period Covered:** 1/25/23 10/17/23 date date PLEASE PRINT/TYPE Beasley, Michael 4 Name (Last, First): 1 Date Accepted 6/29/2023 303 S Broadway Suite 200-321 Address: 2 Contribution Amount 6 City/State/Zip: Denver CO 80209 250.00 7 Description Check 8 Employer (if applicable, <u>mandatory</u>): 3 Aggregate Amount* 5280 Strategies, LLC 250.00 9 Occupation (if applicable, mandatory): President Vanderschaaf, John 1 Date Accepted 4 Name (Last, First): 7/9/2023 Address: 4628 E 115th Cir 2 Contribution Amount 6 City/State/Zip: Thornton CO 80233 50.00 7 Description Electronic donation Employer (if applicable, <u>mandatory</u>): Aggregate Amount* 9 Occupation (if applicable, mandatory): 50.00 Foster, Jennifer 1 Date Accepted 4 Name (Last, First): 7/12/2023 Address: 2334 Country Club Loop 2 Contribution Amount 6 City/State/Zip: Westminster CO 80234 1000.00 7 Description Electronic donation Employer (if applicable, mandatory): Aggregate Amount* Self 1000.00 9 Occupation (if applicable, mandatory): Consultant Gayeski, Larry 4 Name (Last, First): 1 Date Accepted 7/13/2023 Address: 2334 Country Club Loop 2 Contribution Amount 6 City/State/Zip: Westminster CO 80234 1000.00 7 Description Electronic donation Aggregate Amount* 8 Employer (if applicable, <u>mandatory</u>): Gayeski Associates 1000.00 9 Occupation (if applicable, mandatory):

Principal/Broker

^{*} 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:

Reporting Period Covered:

1/25/23

Through
10/17/23

date

DUE A SEE DRIVE/CVAPE

PLEASE PRINT/TYPE		
1 <u>Date Accepted</u>	4 Name (Last, First): Colwell, Naomi	
7/13/2023	5 Address: 5443 South Dan	ube Way
2 <u>Contribution Amount</u>	6 City/State/Zip: Centennial CO 8	0015
\$ 100.00	7 Description Electronic donate	ion
3 Aggregate Amount*	8 Employer (if applicable, <u>mandatory</u>):	Aurora Chamber of Commerce
\$ 100.00	9 Occupation (if applicable, <u>mandatory</u>):	President / CEO
1 Date Accepted	4 Name (Last, First): Milo, Tony	
7/14/2023	5 Address: 6880 S Yosemite	e Ct
2 <u>Contribution Amount</u>	6 City/State/Zip: Centennial CO 8	0112
\$ 250.00	7 Description Electronic donate	ion
3 Aggregate Amount*	8 Employer (if applicable, <u>mandatory</u>):	Colorado Contractors Association
\$ 250.00	9 Occupation (if applicable, <u>mandatory</u>):	President & CEO
1 Date Accepted	4 Name (Last, First): Breuer, Bryan	
7/18/2023	5 Address: 815 Medea Way	
	5 Hadress.	_
2 <u>Contribution Amount</u>	6 City/State/Zip: Denver CO 8020)9
2 Contribution Amount \$ 1000.00		
	6 City/State/Zip: Denver CO 8020	
\$ 1000.00	6 City/State/Zip: Denver CO 8020 7 Description Electronic donate	ion
\$ 1000.00 3 Aggregate Amount*	6 City/State/Zip: Denver CO 8020 7 Description Electronic donate 8 Employer (if applicable, mandatory):	Littleton School District
\$ 1000.00 3 Aggregate Amount* \$ 1000.00	6 City/State/Zip: Denver CO 8020 7 Description Electronic donat 8 Employer (if applicable, mandatory): 9 Occupation (if applicable, mandatory):	Littleton School District Principal
\$ 1000.00 3 Aggregate Amount* \$ 1000.00 1 Date Accepted	6 City/State/Zip: Denver CO 8020 7 Description Electronic donate 8 Employer (if applicable, mandatory): 9 Occupation (if applicable, mandatory): 4 Name (Last, First): Fellman, Ken	Littleton School District Principal
\$ 1000.00 3 Aggregate Amount* \$ 1000.00 1 Date Accepted 7/23/2023	6 City/State/Zip: Denver CO 8020 7 Description Electronic donate 8 Employer (if applicable, mandatory): 9 Occupation (if applicable, mandatory): 4 Name (Last, First): Fellman, Ken 5 Address: 12659 W 94th D	Littleton School District Principal
\$ 1000.00 3 Aggregate Amount* \$ 1000.00 1 Date Accepted	6 City/State/Zip: Denver CO 8020 7 Description Electronic donate 8 Employer (if applicable, mandatory): 9 Occupation (if applicable, mandatory): 4 Name (Last, First): Fellman, Ken 5 Address: 12659 W 94th D 6 City/State/Zip: Arvada CO 8000	Littleton School District Principal or

^{*} 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 Angie Bedolla Through **Reporting Period Covered:** 1/25/23 10/17/23 date date PLEASE PRINT/TYPE Geraets, Amy 4 Name (Last, First): 1 Date Accepted 604~W~9th~St7/28/2023 Address: 2 Contribution Amount 6 City/State/Zip: Dell Rapids SD 57022 10.00 7 Description Electronic donation 8 Employer (if applicable, mandatory): 3 Aggregate Amount* 10.00 9 Occupation (if applicable, mandatory): Metro Housing Coalition Administrative Account 1 Date Accepted 4 Name (Last, First): 7/28/2023 Address: 9033 E Easter Pl Suite 200 2 Contribution Amount 6 City/State/Zip: Centennial CO 80112 1500.00 7 Description Check Employer (if applicable, mandatory): Aggregate Amount* NA 9 Occupation (if applicable, mandatory): 1500.00 NA Cochran, Samuel 1 Date Accepted 4 Name (Last, First): 8/1/2023 Address: 3524 E 117th Dr 2 Contribution Amount 6 City/State/Zip: Thornton CO 80233 100.00 7 Description Electronic donation 8 Employer (if applicable, mandatory): Aggregate Amount* Adams 12 Five Star School District 100.00 9 Occupation (if applicable, mandatory): Warehouse Senior Buyer Cavazos, Irene 4 Name (Last, First): 1 Date Accepted 8/14/2023 Address: 223 Midland Dr 2 Contribution Amount 6 City/State/Zip: San Antonio TX 75219 20.00 7 Description Check 3 Aggregate Amount* 8 Employer (if applicable, <u>mandatory</u>): 9 Occupation (if applicable, mandatory): 20.00

^{*} 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 Angie Bedolla Through **Reporting Period Covered:** 1/25/23 10/17/23 date date PLEASE PRINT/TYPE Strickland, Debbra 4 Name (Last, First): 1 Date Accepted 8/14/2023 9426 Sumac Ln Address: 2 Contribution Amount 6 City/State/Zip: Garden Ridge TX 78264 7 Description 50.00 Check 8 Employer (if applicable, mandatory): 3 Aggregate Amount* \$ 50.00 9 Occupation (if applicable, mandatory): Thornton Professional Firefighters Local #2367 Political Action Funds 1 Date Accepted 4 Name (Last, First): 8/25/2023 Address: PO Box 29425 2 Contribution Amount 6 City/State/Zip: Thornton CO 80229 700.00 7 Description Check 8 Employer (if applicable, <u>mandatory</u>): Aggregate Amount* NA 9 Occupation (if applicable, mandatory): 2450.00 NA Lujan, Lillian 1 Date Accepted 4 Name (Last, First): 8/28/2023 Address: PO Box 1264 2 Contribution Amount 6 City/State/Zip: Canutillo TX 79835 7 Description 50.00 Check 8 Employer (if applicable, mandatory): Aggregate Amount* 50.00 9 Occupation (if applicable, mandatory): Klein, Jamie 4 Name (Last, First): 1 Date Accepted 9/5/2023 Address: 9208 Welby Circle Thornton CO 80229 2 Contribution Amount 6 City/State/Zip: 500.00 7 Description Check 3 Aggregate Amount* 8 Employer (if applicable, <u>mandatory</u>): Klein Trucking 9 Occupation (if applicable, mandatory): 500.00 Owner

^{*} 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 Angie Bedolla Through **Reporting Period Covered:** 1/25/23 10/17/23 date date PLEASE PRINT/TYPE Kulmann, Dave 4 Name (Last, First): 1 Date Accepted 9/7/2023 14824 Filmore Way Address: 2 Contribution Amount 6 City/State/Zip: Thornton CO 80602 1000.00 7 Description Check 8 Employer (if applicable, <u>mandatory</u>): Aggregate Amount* Self 1200.00 9 Occupation (if applicable, mandatory): Consultant Pollard, Kristine 1 Date Accepted 4 Name (Last, First): 9/11/2023 Address: 5 Sandy Lake Rd 2 Contribution Amount 6 City/State/Zip: Englewood CO 80113 150.00 7 Description Electronic donation Employer (if applicable, <u>mandatory</u>): Aggregate Amount* P2LLC 9 Occupation (if applicable, mandatory): 150.00 Consultant Dickhoner, Blair 1 Date Accepted 4 Name (Last, First): 9/11/2023 Address: 2154 East Commons Ave Littleton CO 80122 2 Contribution Amount 6 City/State/Zip: 50.00 7 Description Electronic donation 8 Employer (if applicable, mandatory): Aggregate Amount* 50.00 9 Occupation (if applicable, mandatory): Tanaka, Jennifer 4 Name (Last, First): 1 Date Accepted 9/12/2023 Address: 1272 S Garfield Street 2 Contribution Amount 6 City/State/Zip: Denver CO 80210 100.00 7 Description Electronic donation 3 Aggregate Amount* 8 Employer (if applicable, <u>mandatory</u>): White Bear Ankele Tanaka & Waldron 9 Occupation (if applicable, mandatory): 100.00 Attorney

^{*} 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 Angie Bedolla Through **Reporting Period Covered:** 1/25/23 10/17/23 date date PLEASE PRINT/TYPE Lucero, David 4 Name (Last, First): 1 Date Accepted PO Box 33895 9/29/2023 Address: 2 Contribution Amount 6 City/State/Zip: Northglenn CO 80233 7 Description 200.00 Check 8 Employer (if applicable, <u>mandatory</u>): 3 Aggregate Amount* Desdinova Transportation 200.00 9 Occupation (if applicable, mandatory): Owner Consumer Fireworks Safety Asn. Political Action Committee 1 Date Accepted 4 Name (Last, First): 10/3/2023 Address: PO Box 1438 2 Contribution Amount 6 City/State/Zip: Tacoma WA 98401 250.00 7 Description Check Employer (if applicable, mandatory): Aggregate Amount* NA 9 Occupation (if applicable, mandatory): 250.00 NA **REALTOR Candidate Political Action Committee** 1 Date Accepted 4 Name (Last, First): 10/4/2023 Address: 309 Inverness Way S 2 Contribution Amount 6 City/State/Zip: Englewood CO 80112 1000.00 7 Description Check 8 Employer (if applicable, mandatory): Aggregate Amount* NA 1000.00 9 Occupation (if applicable, mandatory): NA McCarthy, Timothy 4 Name (Last, First): 1 Date Accepted 10/4/2023 Address: 809 5th St 2 Contribution Amount 6 City/State/Zip: Golden CO 80403 100.00 7 Description Electronic donation 3 Aggregate Amount* 8 Employer (if applicable, <u>mandatory</u>): Schedio Group LLC 100.00 9 Occupation (if applicable, mandatory): Engineer

^{*} 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).

Friends of Angie Bedolla **Full Name of Committee/Person: Reporting Period Covered:** Through 1/25/23 10/17/23 date PLEASE PRINT/TYPE Tyburczy, John 1 Date Accepted 4 Name (Last, First): 10/7/2023 Address: 8813 Colorado Blvd 2 Contribution Amount 6 City/State/Zip: Thornton CO 80229 7 Description Electronic donation 8 Employer (if applicable, mandatory): 3 Aggregate Amount* \$ 25.00 9 Occupation (if applicable, <u>mandatory</u>): Smethills, Brock 1 Date Accepted 4 Name (Last, First): 10/10/2023 Address: 258 South Washington St 2 Contribution Amount 6 City/State/Zip: Denver CO 80209 250.00 7 Description Electronic donation 8 Employer (if applicable, <u>mandatory</u>): Aggregate Amount* Sterling Ranch 9 Occupation (if applicable, mandatory): 250.00 President 1 Date Accepted 4 Name (Last, First): Address: 6 City/State/Zip: 2 Contribution Amount 7 Description 8 Employer (if applicable, mandatory): 3 Aggregate Amount* 9 Occupation (if applicable, mandatory): \$ 4 Name (Last, First): 1 Date Accepted Address: 2 Contribution Amount 6 City/State/Zip: 7 Description 3 Aggregate Amount* 8 Employer (if applicable, <u>mandatory</u>): 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).

Full Name of Committee/Person:		Friends of Angi	e Bedolla		
	Reporting Period Cove	ered:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE 1 Date Accepted 2 Contribution Amount \$ 3 Aggregate Amount*	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicable)				
\$ Aggregate Amount*	9 Occupation (if applica	•			
Date Accepted Contribution Amount \$	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description				
3 Aggregate Amount* \$	8 Employer (if applicable 9 Occupation (if application application)	•			
Date Accepted Contribution Amount	4 Name (Last, First): 5 Address: 6 City/State/Zip:				
3 Aggregate Amount* \$	7 Description 8 Employer (if applicable) 9 Occupation (if application)	-			
Date Accepted Contribution Amount \$	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description				
3 Aggregate Amount* \$	8 Employer (if applicable 9 Occupation (if application)				

^{*} 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 Angi	e Bedolla		
	Reporting Period Cove	ered:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE 1 Date Accepted 2 Contribution Amount \$ 3 Aggregate Amount*	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicable)				
\$ Aggregate Amount*	9 Occupation (if applica	•			
Date Accepted Contribution Amount \$	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description				
3 Aggregate Amount* \$	8 Employer (if applicable 9 Occupation (if application application)	•			
Date Accepted Contribution Amount	4 Name (Last, First): 5 Address: 6 City/State/Zip:				
3 Aggregate Amount* \$	7 Description 8 Employer (if applicable) 9 Occupation (if application)	-			
Date Accepted Contribution Amount \$	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description				
3 Aggregate Amount* \$	8 Employer (if applicable 9 Occupation (if application)				

^{*} 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 Angi	e Bedolla		
	Reporting Period Cove	ered:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE 1 Date Accepted 2 Contribution Amount \$ 3 Aggregate Amount*	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicable)				
\$ Aggregate Amount*	9 Occupation (if applica	•			
Date Accepted Contribution Amount \$	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description				
3 Aggregate Amount* \$	8 Employer (if applicable 9 Occupation (if application application)	•			
Date Accepted Contribution Amount	4 Name (Last, First): 5 Address: 6 City/State/Zip:				
3 Aggregate Amount* \$	7 Description 8 Employer (if applicable) 9 Occupation (if application)	-			
Date Accepted Contribution Amount \$	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description				
3 Aggregate Amount* \$	8 Employer (if applicable 9 Occupation (if application)				

^{*} 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 Angie Bedolla			
	Reporting Period Cover	red:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE					
1 Date Accepted	4 Name (Last, First): 5 Address:				
2 Contribution Amount	6 City/State/Zip:				
3 Aggregate Amount*	7 Description 8 Employer (if applicable	mandatory):			
\$ Aggregate Amount	9 Occupation (if applicab				
1 Date Accepted	4 Name (Last, First): 5 Address:				
2 Contribution Amount	6 City/State/Zip:				
3 Aggregate Amount*	7 Description 8 Employer (if applicable				
\$	9 Occupation (if applicab	•			
1 Date Accepted	4 Name (Last, First): 5 Address:				
2 <u>Contribution Amount</u>	6 City/State/Zip:				
\$	7 Description				
3 Aggregate Amount*	8 Employer (if applicable	, <u>mandatory</u>):			
\$	9 Occupation (if applicab	le, <u>mandatory</u>):			
1 Date Accepted	4 Name (Last, First):				
2 Contribution Amount \$	5 Address: 6 City/State/Zip: 7 Description				
3 Aggregate Amount*	8 Employer (if applicable	, <u>mandatory</u>):			
\$	9 Occupation (if applicab	le, <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).

Full Name of Committee/Person:		Friends of Ang	ie Bedolla		
	Reporting Period Cov	ered:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE	_				
1 Date Accepted	4 Name (Last, First): 5 Address:				
2 <u>Contribution Amount</u>	6 City/State/Zip:				
\$	7 Description				
3 Aggregate Amount*	8 Employer (if applicate	ole, <u>mandatory</u>):			
\$	9 Occupation (if applic				_
1 Date Accepted	4 Name (Last, First): 5 Address:				_
2 <u>Contribution Amount</u>	6 City/State/Zip:				
\$	7 Description				
3 Aggregate Amount*	8 Employer (if applicat	ole, mandatory):	_		
\$	9 Occupation (if applic	able, <u>mandatory</u>):			
1 Date Accepted	4 Name (Last, First): 5 Address:				
2 <u>Contribution Amount</u>	6 City/State/Zip:				
\$	7 Description				
3 Aggregate Amount*	8 Employer (if applicab	ole, <u>mandatory</u>):			
\$	9 Occupation (if applic	able, <u>mandatory</u>):			
	T				1
1 Date Accepted	4 Name (Last, First): 5 Address:				
2 <u>Contribution Amount</u>	6 City/State/Zip:				
\$	7 Description				
3 Aggregate Amount*	8 Employer (if applicat	ole, <u>mandatory</u>):	_		
\$	9 Occupation (if applic	able, <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).

Full Name of Committee/Person:		Friends of Angi	e Bedolla		
	Reporting Period Cov	ered:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE					
1 <u>Date Accepted</u>	4 Name (Last, First): 5 Address:				_
2 <u>Contribution Amount</u>	6 City/State/Zip:				
\$	7 Description				
3 Aggregate Amount*	8 Employer (if applicab				
\$	9 Occupation (if applica	able, <u>mandatory</u>):			
1 Date Accepted	4 Name (Last, First): 5 Address:				
2 <u>Contribution Amount</u>	6 City/State/Zip:				
\$	7 Description				
3 Aggregate Amount*	8 Employer (if applicab				
\$	9 Occupation (if applica	able, <u>mandatory</u>):			
1 <u>Date Accepted</u>	4 Name (Last, First):				
	5 Address:				
2 <u>Contribution Amount</u>	6 City/State/Zip:				
\$	7 Description				
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Full Name of Committee/Person:		Friends of Ang	ie Bedolla		
	Reporting Period Co	vered:	1/25/23 date	Through	10/17/23 date
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Full Name of Committee/Person: Friends of Angie Bedolla Through **Reporting Period Covered:** 10/17/23 1/25/23 PLEASE PRINT/TYPE 1 Date Accepted 4 Name (Last, First): 5 Address: 2 Contribution Amount 6 City/State/Zip: \$ 7 Description 8 Employer (if applicable, <u>mandatory</u>): 3 Aggregate Amount* \$ 9 Occupation (if applicable, <u>mandatory</u>): 1 Date Accepted 4 Name (Last, First): 5 Address: 2 Contribution Amount 6 City/State/Zip: \$ 7 Description 3 Aggregate Amount* 8 Employer (if applicable, <u>mandatory</u>): \$ 9 Occupation (if applicable, <u>mandatory</u>): 1 Date Accepted 4 Name (Last, First): 5 Address: 2 Contribution Amount 6 City/State/Zip: \$ 7 Description 3 Aggregate Amount* 8 Employer (if applicable, <u>mandatory</u>): \$ 9 Occupation (if applicable, <u>mandatory</u>): 1 Date Accepted 4 Name (Last, First): 5 Address: 2 Contribution Amount 6 City/State/Zip: \$ 7 Description Aggregate Amount* 8 Employer (if applicable, <u>mandatory</u>): 9 Occupation (if applicable, mandatory): \$

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	Reporting Period Cov	vered:	1/25/23 date	Through	10/17/23 date	
PLEASE PRINT/TYPE	1					
1 Date Accepted	4 Name (Last, First): 5 Address:					
2 Contribution Amount \$	6 City/State/Zip:7 Description				_	
3 Aggregate Amount* \$	8 Employer (if applical 9 Occupation (if applic	ole, <u>mandatory</u>):				
1 <u>Date Accepted</u>	4 Name (Last, First): 5 Address:				_	
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Full Name of Committee/Person: Friends of Angie Bedolla **Reporting Period Covered:** 1/25/23 Through 10/17/23 date date PLEASE PRINT/TYPE 1 Date Accepted 4 Name (Last, First): 5 Address: 2 Contribution Amount 6 City/State/Zip: \$ 7 Description 8 Employer (if applicable, mandatory): 3 Aggregate Amount* 9 Occupation (if applicable, <u>mandatory</u>): \$ 1 Date Accepted 4 Name (Last, First): 5 Address: 2 Contribution Amount 6 City/State/Zip: \$ 7 Description 8 Employer (if applicable, <u>mandatory</u>): 3 Aggregate Amount* \$ 9 Occupation (if applicable, mandatory): 1 Date Accepted 4 Name (Last, First): 5 Address: 2 Contribution Amount 6 City/State/Zip: \$ 7 Description 8 Employer (if applicable, <u>mandatory</u>): Aggregate Amount* 9 Occupation (if applicable, <u>mandatory</u>): \$ 1 Date Accepted 4 Name (Last, First): 5 Address: 2 Contribution Amount 6 City/State/Zip: 7 Description \$ 8 Employer (if applicable, <u>mandatory</u>): 3 Aggregate Amount* \$ 9 Occupation (if applicable, mandatory):

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Full Name of Committee/Person:		Friends of Angi	e Bedolla			
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Full Name of Committee/Person:		Friends of Angi	e Bedolla		
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2 <u>Contribution Amount</u>	6 City/State/Zip:						
\$	7 Description						
3 Aggregate Amount*	8 Employer (if applical	ble, <u>mandatory</u>):					
\$	9 Occupation (if applic	cable, <u>mandatory</u>):					_

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3 Aggregate Amount*	8 Employer (if applicat	ole, <u>mandatory</u>):				
\$	9 Occupation (if applic	able, <u>mandatory</u>):				
1 Date Accepted	4 Name (Last, First): 5 Address:					
2 <u>Contribution Amount</u>	6 City/State/Zip:					
\$	7 Description					
3 Aggregate Amount*	8 Employer (if applicat					
\$	9 Occupation (if applic	able, <u>mandatory</u>):				
1 Date Accepted	4 Name (Last, First): 5 Address:					
2 <u>Contribution Amount</u>	6 City/State/Zip:					
\$	7 Description					
3 Aggregate Amount*	8 Employer (if applicab	ole, <u>mandatory</u>):				
\$	9 Occupation (if applic	able, <u>mandatory</u>):				
1 <u>Date Accepted</u>	4 Name (Last, First): 5 Address:					
2 <u>Contribution Amount</u>	6 City/State/Zip:					
\$	7 Description					
3 Aggregate Amount*	8 Employer (if applicat	ole, mandatory):				
\$	9 Occupation (if applic	able, <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).

Full Name of Committee/Person:		Friends of Angie Bedolla				
	Reporting Period Cove	red:	1/25/23 date	Through	10/17/23 date	
PLEASE PRINT/TYPE	1				1	
1 Date Accepted	4 Name (Last, First): _ 5 Address:					
2 <u>Contribution Amount</u>	6 City/State/Zip:					
\$	7 Description					
3 Aggregate Amount*	8 Employer (if applicable	e, <u>mandatory</u>):				
\$	9 Occupation (if applicat	ole, <u>mandatory</u>):				
1 Date Accepted	4 Name (Last, First): 5 Address:				_	
2 <u>Contribution Amount</u>	6 City/State/Zip:					
\$	7 Description _					
3 Aggregate Amount*	8 Employer (if applicable	e, <u>mandatory</u>):				
\$	9 Occupation (if applicat	ole, <u>mandatory</u>):				
1 <u>Date Accepted</u>	4 Name (Last, First): _ 5 Address:					
2 <u>Contribution Amount</u>	6 City/State/Zip:					
\$	7 Description					
3 Aggregate Amount*	8 Employer (if applicable	e, <u>mandatory</u>):				
\$	9 Occupation (if applicat	ole, <u>mandatory</u>):				
1 Date Accepted	4 Name (Last, First): 5 Address:					
2 <u>Contribution Amount</u>	6 City/State/Zip:					
\$	7 Description					
3 Aggregate Amount*	8 Employer (if applicable	-				
\$	9 Occupation (if applicat	ole, <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).

Full Name of Committee/Person:		Friends of Angie Bedolla					
	Reporting Period Cov	vered:	1/25/23 date	Through	10/17/23 date		
PLEASE PRINT/TYPE	1				1		
1 Date Accepted	4 Name (Last, First): 5 Address:						
2 Contribution Amount \$	6 City/State/Zip:7 Description				_		
3 Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):					
\$	9 Occupation (if applic	able, <u>mandatory</u>):					
1 Date Accepted	4 Name (Last, First): 5 Address:						
2 Contribution Amount \$	6 City/State/Zip:						
3 Aggregate Amount*	7 Description 8 Employer (if applicat						
\$	9 Occupation (if applic	able, <u>mandatory</u>):					
1 <u>Date Accepted</u>	4 Name (Last, First): 5 Address:						
2 Contribution Amount \$	6 City/State/Zip:7 Description						
3 Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):					
\$	9 Occupation (if applic	able, <u>mandatory</u>):					
	1						
1 Date Accepted	4 Name (Last, First): 5 Address:						
2 Contribution Amount	6 City/State/Zip: 7 Description						
3 Aggregate Amount*	7 Description 8 Employer (if applical						
\$	9 Occupation (if applic	able, <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).

Full Name of Committee/Person:		Friends of Angi	e Bedolla		
	Reporting Period Cov	vered:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE	1				
1 <u>Date Accepted</u>	4 Name (Last, First): 5 Address:				
2 Contribution Amount \$	6 City/State/Zip:7 Description				
3 Aggregate Amount*	8 Employer (if applical 9 Occupation (if applic				
1 <u>Date Accepted</u>	4 Name (Last, First): 5 Address:				
2 Contribution Amount \$	6 City/State/Zip:7 Description				
3 Aggregate Amount*	8 Employer (if applical				
\$	9 Occupation (if applic	able, <u>mandatory</u>):			
1 Date Accepted	4 Name (Last, First): 5 Address:				
2 Contribution Amount \$	6 City/State/Zip: 7 Description				
3 Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):			
\$	9 Occupation (if applic	eable, <u>mandatory</u>):			
1 <u>Date Accepted</u>	4 Name (Last, First): 5 Address:				
2 Contribution Amount \$	6 City/State/Zip:7 Description				
3 Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):			
\$	9 Occupation (if applic	cable, <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).

Full Name of Committee/Person:		Friends of Angie Bedolla						
PLEASE PRINT/TYPE	Reporting Period Cov	vered:	1/25.		Through		10/17/23 date	
1 Date Accepted 2 Contribution Amount \$ 3 Aggregate Amount*	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applical							
\$	9 Occupation (if applic							<u> </u>
1 Date Accepted	4 Name (Last, First): 5 Address:							
2 Contribution Amount \$	6 City/State/Zip: 7 Description							
3 Aggregate Amount* \$	8 Employer (if applical 9 Occupation (if applic							<u> </u>
1 <u>Date Accepted</u>	4 Name (Last, First): 5 Address:							
2 Contribution Amount \$	6 City/State/Zip: 7 Description							
3 Aggregate Amount* \$	8 Employer (if applical 9 Occupation (if applic	•						<u> </u>
1 Date Accepted	4 Name (Last, First): 5 Address:							
2 Contribution Amount \$	6 City/State/Zip: 7 Description							<u> </u>
3 Aggregate Amount* \$	8 Employer (if applical 9 Occupation (if applical							<u> </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).

Full Name of Committee/Person:		Friends of Angie Bedolla					
PLEASE PRINT/TYPE	Reporting Period Cov	vered:	1/25/23 date	Through	10/17/23 date		
1 Date Accepted 2 Contribution Amount \$ Aggregate Amount*	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicated) 9 Occupation (if applicated)	ole, <u>mandatory</u>):					
1 Date Accepted 2 Contribution Amount \$ 3 Aggregate Amount*	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicated) 9 Occupation (if applicated)	ole, <u>mandatory</u>):					
1 Date Accepted 2 Contribution Amount \$ 3 Aggregate Amount*	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicated) 9 Occupation (if applicated)	ole, <u>mandatory</u>):					
1 Date Accepted 2 Contribution Amount \$ 3 Aggregate Amount*	4 Name (Last, First): 5 Address: 6 City/State/Zip: 7 Description 8 Employer (if applicate) 9 Occupation (if applicate)	ole, <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:		Friends of Angie Bedolla				
	Reporting Period Cov	vered:	1/25/23 date	Through	10/17/23 date	
PLEASE PRINT/TYPE	1				1	
1 Date Accepted	4 Name (Last, First): 5 Address:					
2 Contribution Amount \$	6 City/State/Zip:7 Description				_	
3 Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):				
\$	9 Occupation (if applic	able, <u>mandatory</u>):				
1 Date Accepted	4 Name (Last, First): 5 Address:					
2 Contribution Amount \$	6 City/State/Zip:					
3 Aggregate Amount*	7 Description 8 Employer (if applicat					
\$	9 Occupation (if applic	able, <u>mandatory</u>):				
1 <u>Date Accepted</u>	4 Name (Last, First): 5 Address:					
2 Contribution Amount \$	6 City/State/Zip:7 Description					
3 Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):				
\$	9 Occupation (if applic	able, <u>mandatory</u>):				
	1					
1 Date Accepted	4 Name (Last, First): 5 Address:					
2 Contribution Amount	6 City/State/Zip: 7 Description					
3 Aggregate Amount*	7 Description 8 Employer (if applical					
\$	9 Occupation (if applic	able, <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:		Friends of Angie Bedolla				
	Reporting Period Cov	vered:	1/25/23 date	Through	10/17/23 date	
PLEASE PRINT/TYPE	1				1	
1 Date Accepted	4 Name (Last, First): 5 Address:					
2 Contribution Amount \$	6 City/State/Zip:7 Description				_	
3 Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):				
\$	9 Occupation (if applic	able, <u>mandatory</u>):				
1 Date Accepted	4 Name (Last, First): 5 Address:					
2 Contribution Amount \$	6 City/State/Zip:					
3 Aggregate Amount*	7 Description 8 Employer (if applicat					
\$	9 Occupation (if applic	able, <u>mandatory</u>):				
1 <u>Date Accepted</u>	4 Name (Last, First): 5 Address:					
2 Contribution Amount \$	6 City/State/Zip:7 Description					
3 Aggregate Amount*	8 Employer (if applical	ole, <u>mandatory</u>):				
\$	9 Occupation (if applic	able, <u>mandatory</u>):				
	1					
1 Date Accepted	4 Name (Last, First): 5 Address:					
2 Contribution Amount	6 City/State/Zip: 7 Description					
3 Aggregate Amount*	7 Description 8 Employer (if applical					
\$	9 Occupation (if applic	able, <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).

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

Full Name of Committee/Person: Friends of Angie Bedolla					
	Reporting Period Cove	red:	1/25/23 date	Through	10/17/23 date
			Total Itemized E	xpenditures:	14,472.79
PLEASE PRINT/TYPE					
1 <u>Date Expended</u>	4 Name (Last, First):	Anedot			
2/10/23 2 <u>Amount</u>	5 Address:	1340 Poy	odrae St		
\$ 37.00 3 Recipient is (optional):	6 City/State/Zip:	New Office	eans LA 70112		
Committee	7 Purpose of Expendit		Electronic contribution of	maaasaina faas	
	/ Fulpose of Expendit	ure.	Electronic contribution p	locessing lees	
V Non-Committee					
1 <u>Date Expended</u>	4 Name (Last, First):	Sir Spee	edy Denver		
2/23/23					
2 Amount	5 Address:	742 Kala	math St		
\$ 593.47	6 City/State/Zip:	Denver C	CO 80204		
3 Recipient is (optional):					
Committee	7 Purpose of Expendit	ure:	Literature printing		
✓ Non-Committee					
1 Date Expended	4 Name (Last, First):	Anedot			
3/31/23	4 Name (Last, Pilst).				
2 Amount	5 Address:	1340 Poy	ydras St		
\$ 12.60	6 City/State/Zip:	New Orle	eans LA 70112		
3 Recipient is (optional):					
Committee	7 Purpose of Expendit	ure:	Electronic contribution p	rocessing fees	
V Non-Committee					
1 <u>Date Expended</u>	4 Name (Last, First):	Anedot			
4/6/23 2 Amount	5 Address:	1340 Poy	vdras St		
\$ 2.30	6 City/State/Zip:		eans LA 70112		
3 Recipient is (optional):	o Chy/State/Zip.	TICW OIL	Cuilo Las /UII2		
Committee	7 Purpose of Expendit	ure.	Electronic contribution p	rocessing foos	
	/ Turpose of Expendit	uic.	Electronic contribution p	occosing ices	
✓ Non-Committee					

Full Name of Committee/Person:		Friends of Angie Bedolla				
	Reporting Period Co	vered:	1/25/23 date	Through [10/17/23 date	
PLEASE PRINT/TYPE						
1 <u>Date Expended</u> 4/11/23	4 Name (Last, First)	: Anedo	t			
2 Amount	5 Address:	1340 P	oydras St			
\$ 10.30	6 City/State/Zip:	New O	rleans LA 70112			
3 Recipient is (optional):						
Committee	7 Purpose of Expen	diture:	Electronic contribution p	rocessing fees		
Non-Committee					_	
1 <u>Date Expended</u>	4 Name (Last, First)	: Anedo	t			
4/13/23	5 Address:	1240 D	ovidrog St			
2 Amount		•	oydras St			
\$ 8.60 3 Recipient is (optional):	6 City/State/Zip:	New O	rleans LA 70112			
Committee	7 Purpose of Expen	dituma	Electronic contribution p	maaasaina faas		
	/ Fulpose of Expen	unure.	Electronic contribution p	rocessing lees	_	
✓ Non-Committee						
1 <u>Date Expended</u>	4 Name (Last, First)	: Anedo	t			
4/14/23 2 <u>Amount</u>	5 Address:	1340 P	oydras St			
\$ 64.90	6 City/State/Zip:		rleans LA 70112			
3 Recipient is (optional):		<u> </u>	221, 0112		_	
Committee	7 Purpose of Expen	diture:	Electronic contribution p	rocessing fees		
Non-Committee			1	<u> </u>		
Non-Commutee	-					
1 <u>Date Expended</u>	4 Name (Last, First)	: Anedo	<u>t</u>			
4/15/23 2 <u>Amount</u>	5 Address:	1340 P	oydras St			
\$ 30.60	6 City/State/Zip:	•	rleans LA 70112			
3 Recipient is (optional):	o City/State/Zip.	TICW O	neuro La 10112			
Committee	7 Purpose of Expen	diture:	Electronic contribution p	rocessing fees		
	, Turpose of Expen	aituic.	Executionic contribution p	rocessing ices		
Von-Committee						

Full Name of Committee/Person:		Friends of Angie Bedolla				
	Reporting Period Cov	vered:	1/25/23 date	Through [10/17/23 date	
PLEASE PRINT/TYPE						
1 <u>Date Expended</u> 4/17/23	4 Name (Last, First)	: Anedo	t			
2 <u>Amount</u>	5 Address:	1340 P	oydras St			
\$ 12.60	6 City/State/Zip:	New O	rleans LA 70112			
3 Recipient is (optional):						
Committee	7 Purpose of Expend	liture:	Electronic contribution p	rocessing fees		
Non-Committee						
	ļ					
1 Date Expended	4 Name (Last, First)	Ringsi	de Consulting LLC			
4/17/23 2 Amount	5 Address:	4050 C	hase St			
\$ 500.00	6 City/State/Zip:		Ridge CO 80212			
3 Recipient is (optional):	o City/Butte/Zip.	Whoat	111111111111111111111111111111111111111			
Committee	7 Purpose of Expend	liture:	Campaign consulting ser	vices		
Non-Committee	T T T T T T T T T T T T T T T T T T T					
Tron Commune						
	1	Hanima	n Danna ana ahi aa			
1 <u>Date Expended</u> 4/19/23	4 Name (Last, First)	: Horizo	on Reprographics			
2 <u>Amount</u>	5 Address:	1030 V	V Ellsworth Ave # G			
\$ 214.36	6 City/State/Zip:	Denver	· CO 80233			
3 Recipient is (optional):						
Committee	7 Purpose of Expend	liture:	Literature printing			
✓ Non-Committee					_	
		Anada	<u> </u>			
1 <u>Date Expended</u>	4 Name (Last, First)	: Anedo				
4/21/23 2 <u>Amount</u>	5 Address:	1340 P	oydras St			
\$ 15.90	6 City/State/Zip:		rleans LA 70112			
3 Recipient is (optional):						
Committee	7 Purpose of Expend	liture:	Electronic contribution p	rocessing fees		
Non-Committee						
1 Ton Commune						

Full Name of Committee/Person:		Friends of Angie Bedolla				
	Reporting Period Cov	vered:	1/25/23 date	Through	10/17/23 date	
PLEASE PRINT/TYPE						
1 <u>Date Expended</u>	4 Name (Last, First)	: Anedo	t			
4/25/23 2 <u>Amount</u>	5 Address:	1340 P	oydras St			
\$ 30.60	6 City/State/Zip:		rleans LA 70112			
3 Recipient is (optional):					_	
Committee	7 Purpose of Expend	diture:	Electronic contribution p	rocessing fees		
Non-Committee						
1 <u>Date Expended</u>	4 Name (Last, First)	: Charity	y Meinhart Design			
5/11/23 2 <u>Amount</u>	5 Address:	754 Flo	ower St			
\$ 150.00	6 City/State/Zip:		Junction CO 81506			
3 Recipient is (optional):	o City/State/Zip.	Orana s	valication CO 61300			
Committee	7 Purpose of Expend	diture:	Design services			
✓ Non-Committee						
1 <u>Date Expended</u>	4 Name (Last, First)	: Anedo	t			
5/15/23 2 <u>Amount</u>	5 Address:	1340 P	oydras St			
\$ 10.30	6 City/State/Zip:		rleans LA 70112			
3 Recipient is (optional):						
Committee	7 Purpose of Expend	diture:	Electronic contribution p	rocessing fees		
Non-Committee						
1 Date Expended	4 Name (Last, First)	: Anedo	t			
5/24/23						
2 Amount	5 Address:	1340 P	oydras St			
\$ 20.30	6 City/State/Zip:	New O	rleans LA 70112			
3 Recipient is (optional):						
Committee	7 Purpose of Expend	diture:	Electronic contribution p	rocessing fees		
Non-Committee						

Full Name of Committee/I	Person: Friends	of Ang	ie Bedolla		
]	Reporting Period Cove	red:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE	_				
1 <u>Date Expended</u>	4 Name (Last, First):	Underv	vood LLC		
5/30/23 2 <u>Amount</u>	5 Address:	1500 W	Thornton Pkw 228		
\$ 1000.00	6 City/State/Zip:		on CO 80260		
3 Recipient is (optional):		111011110			
Committee	7 Purpose of Expendit	ure:	Campaign consulting se	rvices	
Non-Committee					
	-				_
1. D. E. 1.1		Ringsia	le Consulting LLC		
1 <u>Date Expended</u> 5/30/23	4 Name (Last, First):	Tungsic	Le Consulting LLC		
2 Amount	5 Address:	4050 Cl	hase St		_
\$ <mark>711.95</mark>	6 City/State/Zip:	Wheat I	Ridge CO 80212		_
3 Recipient is (optional):					
Committee	7 Purpose of Expendit	ure:	Campaign consulting se	rvices	
✓ Non-Committee					
1 <u>Date Expended</u>	4 Name (Last, First):	Anedot			
6/2/23					_
2 Amount	5 Address:		oydras St		
\$ 20.60 3 Recipient is (optional):	6 City/State/Zip:	New Or	eleans LA 70112		
Committee	7 Purpose of Expendit	11 r Δ'	Electronic contribution	processing fees	
	7 Fulpose of Expellent	ure.	Electronic contribution	processing rees	
Non-Committee					
	1				
1 <u>Date Expended</u>	4 Name (Last, First):	Kulmaı	nn, Dave		
6/5/23 2 <u>Amount</u>	5 Address:	14824 F	Fillmore Way		
\$ 202.95					·
	6 City/State/Zin:	Thornto	on CO 80602		
3 Recipient is (optional):	6 City/State/Zip:	Thornto	on CO 80602		
	6 City/State/Zip: 7 Purpose of Expendit		on CO 80602 Sticky note printing/orde	ering	

Full Name of Committee	e/Person: Friends	of Angi	ie Bedolla		
	Reporting Period Cove	ered:	1/25/23	Through	10/17/23
			date		date
PLEASE PRINT/TYPE					
1 <u>Date Expended</u>	4 Name (Last, First):	Ringsic	le Consulting LLC		
6/12/23 2 <u>Amount</u>	5 Address:	4050 Cł	nase St		
\$ 1000.00	6 City/State/Zip:	Wheat F	Ridge CO 80212		
3 Recipient is (optional):					
Committee	7 Purpose of Expendi	iture:	Camapign consulting ser	vices	
✓ Non-Committee					
1 Date Expended	4 Name (Last, First):	United	States Postal Service		
6/12/23	4 Name (Last, Prist).				
2 Amount	5 Address:	12470 Y	York St		
\$ 336.00	6 City/State/Zip:	Eastlake	e CO 80614		
3 Recipient is (optional):					
Committee	7 Purpose of Expendi	iture:	Stamps for notecards		
▼ Non-Committee					
1 Date Expended	4 Name (Last, First):	Anedot			
6/22/23					
2 Amount	5 Address:	1340 Po	oydras St		
\$ 10.30	6 City/State/Zip:	New Or	leans LA 70112		
3 Recipient is (optional):					
Committee	7 Purpose of Expendi	iture:	Electronic contribution p	rocessing fees	
✓ Non-Committee					
1 <u>Date Expended</u>	4 Name (Last, First):	Horizon	n Reprographics		
6/28/23	Trume (East, Frist).				_
2 <u>Amount</u>	5 Address:	1030 W	Ellsworth Ave # G		
\$ 245.26	6 City/State/Zip:	Denver	CO 80233		
3 Recipient is (optional):					
Committee	7 Purpose of Expendi	iture:	Design services		
▼ Non-Committee					
l					

Full Name of Committee	e/Person: Friends	Friends of Angie Bedolla				
	Reporting Period Cov	ered:	1/25/23	Through	10/17/23	
	• 0		date		date	
PLEASE PRINT/TYPE						
1 <u>Date Expended</u>	4 Name (Last, First):	Underv	vood LLC			
7/3/23						
2 Amount	5 Address:		Thornton Pkw 228			
\$ <mark>1000.00</mark>	6 City/State/Zip:	Thornto	on CO 80260			
3 Recipient is (optional):						
Committee	7 Purpose of Expend	iture:	Campaign consulting ser	vices		
✓ Non-Committee						
					-	
1.5.5	4 N (7 - F)	Sir Spe	eedy Denver			
1 <u>Date Expended</u> 7/5/23	4 Name (Last, First):	Sil Spe	edy Benver			
2 Amount	5 Address:	742 Kal	lamath St			
\$ 951.00	6 City/State/Zip:	Denver	CO 80204			
3 Recipient is (optional):	, ,					
Committee	7 Purpose of Expend	iture:	Campaign signs			
Non-Committee						
Non-Commutee	-				_	
1 <u>Date Expended</u>	4 Name (Last, First):	Walma	rt		_	
7/7/23	5 A 11	0001.0	64			
2 Amount	5 Address:	9901 G				
\$ 129.57	6 City/State/Zip:	Thornto	on CO 80229		_	
3 Recipient is (optional):						
Committee	7 Purpose of Expend	iture:	Notecards			
✓ Non-Committee						
1 Date Expended	4 Name (Last, First):	Anedot	t			
7/9/23	Trume (East, First).					
2 Amount	5 Address:	1340 Pc	oydras St		_	
\$ 2.60	6 City/State/Zip:	New O	rleans LA 70112			
3 Recipient is (optional):						
Committee	7 Purpose of Expend	iture:	Electronic contribution p	rocessing fees		
Non-Committee						
Tron Commune						

Full Name of Committee/Person: Friends of Angie Bedolla				
	TI 10/17/00			
	Reporting Period Covered: 1/25/23 Through 10/17/23			
PLEASE PRINT/TYPE				
1 Date Expended	4 Name (Last, First): Ringside Consulting LLC			
7/10/23				
2 <u>Amount</u>	5 Address: 4050 Chase St			
\$ 200.00	6 City/State/Zip: Wheat Ridge CO 80212			
3 Recipient is (optional):				
Committee	7 Purpose of Expenditure: <u>Database reimbursement</u>			
Non-Committee				
Troil Committee				
1.5.5.11	1 Name (Last First). Anedot			
1 <u>Date Expended</u>	4 Name (Last, First): Anedot			
7/14/23 2 Amount	5 Address: 1340 Poydras St			
\$ 54.90	6 City/State/Zip: New Orleans LA 70112			
3 Recipient is (optional):	110 110 110 110 110 110 110 110 110 110			
Committee	7 Purpose of Expenditure: Electronic contribution processing fees			
	Licetonic contribution processing rees			
Non-Committee				
1 <u>Date Expended</u>	4 Name (Last, First): Chairty Meinhart Designs			
7/14/23 2 <u>Amount</u>	5 Address: 754 Flower St			
\$ 131.25	6 City/State/Zip: Grand Junction CO 81506			
3 Recipient is (optional):	of City/State/Zip. Orang Juneton CO 81300			
Committee	7 Purpose of Expenditure: <u>Graphic design services</u>			
✓ Non-Committee				
1 <u>Date Expended</u>	4 Name (Last, First): United States Postal Service			
7/14/23	5 A 11			
2 Amount	5 Address: 12470 York St			
\$ 1021.00	6 City/State/Zip: Eastlake CO 80614			
3 Recipient is (optional):				
Committee	7 Purpose of Expenditure: Stamps for notecards			
Non-Committee				
ı 				

Full Name of Committee/Person: Friends of Angie Bedolla			
T	D	105.00	
ı	Reporting Period Cov	ered: 1/25/23 Through 10/17/23 date date	
PLEASE PRINT/TYPE			
1 Date Expended	4 Name (Last, First):	Anedot	
7/18/23			
2 <u>Amount</u>	5 Address:	1340 Poydras St	
\$ 40.30	6 City/State/Zip:	New Orleans LA 70112	
3 Recipient is (optional):			
Committee	7 Purpose of Expendi	iture: Electronic contribution processing fees	
✓ Non-Committee			
	<u> </u>		
1 <u>Date Expended</u>	4 Name (Last, First):	Anedot	
7/23/23		1240 D. 1. G.	
2 Amount	5 Address:	1340 Poydras St	
\$ 8.30	6 City/State/Zip:	New Orleans LA 70112	
3 Recipient is (optional):			
Committee	7 Purpose of Expendi	iture: Electronic contribution processing fees	
Non-Committee			
	T	Amadas	
1 <u>Date Expended</u>	4 Name (Last, First):	Anedot	
7/28/23 2 <u>Amount</u>	5 Address:	1340 Poydras St	
\$ 0.70	6 City/State/Zip:	New Orleans LA 70112	
3 Recipient is (optional):	o eny/suic/zip.	Trew Officials Ext 70112	
Committee	7 Purpose of Expendi	iture: Electronic contribution processing fees	
Non-Committee			
F	T	Annalisa	
1 <u>Date Expended</u>	4 Name (Last, First):	Anedot	
8/1/23 2 <u>Amount</u>	5 Address:	1340 Poydras St	
	6 City/State/Zip:	New Orleans LA 70112	
\$ 4.30 3 Recipient is (optional):	o Chy/State/Zip.	New Oricalis LA 10112	
Copionia).			
Committee	7 Purpose of Expendi	iture: Electronic contribution processing fees	
Non-Committee			

Full Name of Committee	Person: Friends of Angie Bedolla
	Reporting Period Covered: 1/25/23 date Through 10/17/23 date
PLEASE PRINT/TYPE	
1 <u>Date Expended</u>	4 Name (Last, First): Home Depot
8/7/23	
2 Amount	5 Address: 10003 Grant St
\$ 25.97	6 City/State/Zip: Thornton CO 80229
3 <u>Recipient is (optional):</u>	
Committee	7 Purpose of Expenditure: Stakes for 4x8 signs
I	
Non-Committee	
1 <u>Date Expended</u>	4 Name (Last, First): Ringside Consulting LLC
8/8/23	
2 Amount	5 Address: 4050 Chase St
\$ 200.00	6 City/State/Zip: Wheat Ridge CO 80212
3 Recipient is (optional):	
Committee	7 Purpose of Expenditure: Database reimbursement
Non-Committee	
	T
1 Date Expended	4 Name (Last, First): Horizon Reprographics
8/18/23	
2 Amount	5 Address: 1030 W Ellsworth Ave # G
\$ 603.91	6 City/State/Zip: Denver CO 80233
3 Recipient is (optional):	
Committee	7 Purpose of Expenditure: Literature printing
Non-Committee	
<u></u>	
1 Date Expended	4 Name (Last, First): Egloff, Tanner
8/30/23	
2 Amount	5 Address: 940 S Florence St
\$ 50.00	6 City/State/Zip: Denver CO 80247
3 <u>Recipient is (optional):</u>	
Committee	7 Purpose of Expenditure: Sign installation
Non-Committee	

Full Name of Committee/Person:		s of Angi	ie Bedolla		
	Reporting Period Cov	ered:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE	<u> </u>				
1 <u>Date Expended</u>	4 Name (Last, First):	Ringsid	le Consulting LLC		
9/5/23			_		
2 Amount	5 Address:	4050 Ch			
\$ 650.00	6 City/State/Zip:	Wheat F	Ridge CO 80212		
3 Recipient is (optional):					
Committee	7 Purpose of Expend	liture:	Campaign consulting se	rvices	
Non-Committee					
		** 1	111.0		
1 <u>Date Expended</u>	4 Name (Last, First):	Underw	vood LLC		
9/6/23					
2 Amount	5 Address:		Thornton Pkw 228		
\$ 1000.00	6 City/State/Zip:	Thornto	n CO 80260		
3 Recipient is (optional):					
Committee	7 Purpose of Expend	liture:	Campaign consulting se	rvices	
✓ Non-Committee					
1 Date Expended	4 Name (Last, First):	Anedot			
9/12/23					
2 Amount	5 Address:		ydras St		
\$ 12.90	6 City/State/Zip:	New Or	leans LA 70112		
3 Recipient is (optional):					
Committee	7 Purpose of Expend	iture:	Electronic contribution	processing fees	
✓ Non-Committee					
Tron Committee					
1. Data E. a. a. 1. 1	4 Nove Cost Find	Anedot			
1 <u>Date Expended</u>	4 Name (Last, First):	Alledot			
10/4/23 2 Amount	5 Address:	1340 Po	ovdras St		
\$ 4.30	6 City/State/Zip:		leans LA 70112		
3 Recipient is (optional):	o City/State/Zip.	110W OI	icuns La 170112		<u> </u>
Committee	7 Purpose of Expend	iture:	Electronic contribution	processing fees	
Non-Committee					

Full Name of Committee	/Person: Friends of Angie Bedolla	
		_
	Reporting Period Covered: 1/25/23 Through 10/17/23 date date	
PLEASE PRINT/TYPE		
1 Date Expended	4 Name (Last, First): Anedot	-
10/7/23		
2 Amount	5 Address: 1340 Poydras St	
\$ 1.30	6 City/State/Zip: New Orleans LA 70112	
3 Recipient is (optional):		
Committee	7 Purpose of Expenditure: Electronic contribution processing fees	_
✓ Non-Committee		
1 <u>Date Expended</u>	4 Name (Last, First): Anedot	_
10/10/23 2 <u>Amount</u>	5 Address: 1340 Poydras St	
\$ 10.30	6 City/State/Zip: New Orleans LA 70112	_
3 Recipient is (optional):		_
Committee	7 Purpose of Expenditure: Electronic contribution processing fees	
Non-Committee		
1 Date Expended	4 Name (Last, First): Mittera	
10/17/23	4 Ivalie (Last, First).	_
2 Amount	5 Address: 5000 Osage St #100	
\$ 3129.30	6 City/State/Zip: Denver CO 80221	
3 Recipient is (optional):		
Committee	7 Purpose of Expenditure: Mailers postage & sending	
✓ Non-Committee		
1 <u>Date Expended</u>	4 Name (Last, First):	
2 Amount	5 Address:	
\$ Amount	6 City/State/Zip:	_
3 Recipient is (optional):	o Chybuidzip.	_
Committee	7 Purpose of Expenditure:	
Non-Committee		
		_

Full Name of Committee/Person: Friends of Angie Bedolla				
	Reporting Period Covered:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE				
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/Zin:			
3 Recipient is (optional):				
Committee	7 Purpose of Expenditure:			
Non-Committee				
Non-Commutee				
1.5.5				
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				
Troil Committee				
1 <u>Date Expended</u>	4 Name (Last, First):			
1 <u>Bute Expended</u>				
2 Amount	5 Address:			
\$	6 City/State/Zip:			
3 Recipient is (optional):				
Committee	7 Purpose of Expenditure:			
Non-Committee				

Full Name of Committee/Person: Friends of Angie Bedolla				
	Reporting Period Covered:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE				
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 Date Expended	4 Name (Last, First):			
1 <u>Suic Expended</u>	Trume (Zast, 1 list).			
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				
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				

Full Name of Committee/Person: Friends of Angie Bedolla					
	Reporting Period Covered:	1/25/23 date	Through	10/17/23 date	
PLEASE PRINT/TYPE					
1 <u>Date Expended</u>	4 Name (Last, First):				
2 Amount					
3 Recipient is (optional):	6 City/State/Zip:				
Committee	7 Purpose of Expenditure:				
Non-Committee					
1 Date Expended	4 Name (Last, First):				
2 Amount	5 Address:				
\$ Recipient is (optional):	6 City/State/Zip:				
Committee	7 Purpose of Expenditure:				
Non-Committee					
	1				
1 <u>Date Expended</u>	4 Name (Last, First):				
2 <u>Amount</u>	5 Address:				
\$ Recipient is (optional):	6 City/State/Zip:				
Committee	7 Purpose of Expenditure:				
Non-Committee					
1 <u>Date Expended</u>	4 Name (Last, First):				
2 Amount	5 Address:				
\$ Recipient is (optional):	6 City/State/Zip:				
Committee	7 Purpose of Expenditure:				
Non-Committee					

Full Name of Committee/Person: Friends of Angie Bedolla					
	Reporting Period Covered:	1/25/23	Through	10/17/23	
	•	date	_	date	
PLEASE PRINT/TYPE					
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					
3 Recipient is (optional):	6 City/State/Zip:				
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 <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					

Full Name of Committee/Person: Friends of Angie Bedolla				
	Reporting Period Covered:	1/25/23 date	Through	10/17/23 date
PLEASE PRINT/TYPE				
1 <u>Date Expended</u>	4 Name (Last, First):			
2 Amount				
\$ Recipient is (optional):	6 City/State/Zip:			
Committee	7 Purpose of Expenditure:			
Non-Committee				
1 <u>Date Expended</u>	4 Name (Last, First):			
2 Amount				
\$	6 City/State/Zip:			
3 Recipient is (optional):				
Committee	7 Purpose of Expenditure:			
Non-Committee				
	<u> </u>			
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				
	l			
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				

Full Name of Committee/Person: Friends of Angie Bedolla					
	Reporting Period (Covered:	1/25/23	Through	10/17/23
	Keporting Teriou V	Lovereu.	date	I in ough	date
PLEASE PRINT/TYPE					
1 <u>Date Expended</u>	4 Name (Last, Fi	rst):			
2 Amount	5 Address: 6 City/State/Zip:				
3 Recipient is (optional):	0 City/State/Zip.				
Committee	7 Purpose of Exp	enditure:			
Non-Committee					
1 Date Expended	4 Name (Last, Fi	rat):			
1 <u>Date Expended</u>	4 Name (Last, Fi				
2 Amount	5 Address:				
\$ 2 P : : : : : : : 1	6 City/State/Zip:				
3 Recipient is (optional):					
Committee	7 Purpose of Exp	enditure:			
Non-Committee					
1 Date Expended	4 Name (Last, Fi	mat).			
1 <u>Date Expended</u>	4 Name (Last, Fi				
2 Amount	5 Address:				
\$	6 City/State/Zip:				
3 Recipient is (optional):					
Committee	7 Purpose of Exp	enditure:			
Non-Committee					
1 <u>Date Expended</u>	4 Name (Last, Fi	rst):			
2 Amount	5 Address:				
\$	6 City/State/Zip:				
3 Recipient is (optional):					
Committee	7 Purpose of Exp	enditure:			
Non-Committee					

Full Name of Committee/Person: Friends of Angie Bedolla				
	Reporting Period Covered:	1/25/23 date	Through 10/17/23 date	
PLEASE PRINT/TYPE	1			
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:			
3 Recipient is (optional):	6 City/State/Zip:			
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):	o City/State/Zip.			
Committee	7 Purpose of Expenditure:			
Non-Committee				
1 <u>Date Expended</u>	4 Name (Last, First):			
2 Amount	5 Address:			
\$ 3 Recipient is (optional):	6 City/State/Zip:			
Committee	7 Purpose of Expenditure:			
Non-Committee				

Full Name of Committee/Person: Friends of Angie Bedolla				
	Reporting Period Covered:	1/25/23	Through	10/17/23
	Reporting Ferrou Covereu.	date	Tin ough	date
PLEASE PRINT/TYPE				
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				
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):				<u></u> _
Committee	7 Purpose of Expenditure:			
Non-Committee				

Full Name of Committee/Person: Friends of Angie Bedolla				
	Reporting Period Covered: 1/25/23 Through 10/17/23 date			
PLEASE PRINT/TYPE				
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 Date Expended	4 Name (Last, First):			
2 <u>Amount</u>	5 Address:			
\$	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):				
Committee	7 Purpose of Expenditure:			
Non-Committee				
1 <u>Date Expended</u>	4 Name (Last, First):			
2 <u>Amount</u>	5 Address:			
\$	6 City/State/Zip:			
3 Recipient is (optional):				
Committee	7 Purpose of Expenditure:			
Non-Committee				

Full Name of Committee/Person: Friends of Angie Bedolla				
	Reporting Period Covered:	1/25/23	Through	10/17/23
	Reporting 1 criou covereu.	date	Imough [date
PLEASE PRINT/TYPE				
1 <u>Date Expended</u>	4 Name (Last, First):			
2 Amount \$	5 Address: 6 City/State/Zip:			
3 Recipient is (optional):	o city/state/21p.			
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):				
Committee	7 Purpose of Expenditure:			
Non-Committee				
1 <u>Date Expended</u>	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):			
2 Amount	5 Address:			
\$	6 City/State/Zip:			
3 Recipient is (optional):				
Committee	7 Purpose of Expenditure:			
Non-Committee				

	Schedu	le C - Loans		
Full Name of Committee/Person:	Friends of Angie Bed	dolla		
Reporting	Period Covered:	1/25/23 date	Through	10/17/23 date
	LOANS - Loans	Owed by the Committee		
(Use a separate schedul [No information copied from such repor purpose. [Art. XXVIII, Sec. 9(e)] Notwithstanding an institution organized under state assures repayment, is evidenced by a	ts shall be sold or used by a y other section of this article e or federal law if the loan	le to the contrary, a candidate bears the usual and customar	soliciting contributions e's candidate committee y interest rate, is made of	or for any commercial may receive a loan from a financial on a basis that
LOAN SOURCE				
Name (Last, First or Institution):				
Address:				
City/State/Zip:				
Original Amount of Loan: \$			Interest Rate:	%
		Total of	All Loans This Re	porting
		Period:		
			(Place on line 8 of D	etailed Summary Report)
Loan Amount Received This Reporting Pe	eriod:			
Principal Amount Paid This Reporting Per	riod:			
Interest Amount Paid This Reporting Period	od:			
Amount Repaid This Reporting Period: (Amount Repaid is sum of Principal & Interest entered	son Detail Summary)		epayments Made: of Schedule C pages, Pla	\$0.00 ce on line 16 of Detailed Summary)
Outstanding Balance:				
TERMS OF LOAN:				

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Due Date for Final Payment

Date Loan Received

Full Name	Address, City, St., Zip	Amount Guaranteed

Full Name of Committee/Person:	Friends of Angie Bedo	lla		
Reporting	Period Covered:	1/25/23 date	Through	10/17/23 date
LOAN SOURCE				
Name (Last, First or Institution):				
Address:				
City/State/Zip:				
Original Amount of Loan: \$			Interest Rate:	
Loan Amount Received This Reporting Periodic Principal Amount Paid This Reporting Periodic Principal Amount Paid This Reporting Periodic Principal	d:			
Amount Repaid This Reporting Period: (Amount Repaid is sum of Principal & Interest entered of	\$0.00 n Detail Summary)			
Outstanding Balance:				
TERMS OF LOAN:	Date Loan Re	ceived	-	Due Date for Final Payment

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, City, St., Zip	Amount Guaranteed

Schedule C - Loans

Page 3

Full Name of Committee/Person:	Friends of Angie Bedolla					
Reporting	g Period Covered:	1/25/23 date	Through	10/17/23 date		
LOAN SOURCE						
Name (Last, First or Institution):						
Address:						
City/State/Zip:						
Original Amount of Loan: \$			Interest Rate:			
Loan Amount Received This Reporting Perincipal Amount Paid This Reporting Perinterest Amount Paid This Reporting Perinterest Amount Repaid This Reporting Period: (Amount Repaid is sum of Principal & Interest entered Outstanding Balance:	od: \$0.00					
TERMS OF LOAN:				D. D. C. F. ID		
	Date Loan R	eceived		Due Date for Final Payment		

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, City, St., Zip	Amount Guaranteed

$Schedule\ D-Returned\ Expenditures\ \&\ Contributions$

Full Name of Committee/Person:	Friends of Angie Bedolla				
	Reporting Period Covered: 1/25/23 Through 10/17/23 date Total Returned Contributions: \$ - Total Returned Expenditures: \$ -				
(Previously reported	Returned Contributions d on Schedule A – Contributions accepted and then returned to donors)				
PLEASE PRINT/TYPE					
1 <u>Date Accepted</u> 4 Name (La	ast, First):				
2 <u>Date Returned</u> 5 Address: 6 City/State	e/Zip:				
3 Amount 7 Purpose:					
1 <u>Date Accepted</u> 4 Name (La	ast, First):				
2 <u>Date Returned</u> 5 Address: 6 City/State					
3 Amount 7 Purpose:					
(Previously reported PLEASE PRINT/TYPE	Returned Expenditures on Schedule B – Expenditures returned or refunded to the committee)				
1 <u>Date Expended</u> 4 Name (La	ast, First):				
2 <u>Date Returned</u> 5 Address: 6 City/State	e/Zip:				
3 Amount 7 Comments	t (optional):				
1 <u>Date Expended</u> 4 Name (La	ast, First):				
2 <u>Date Returned</u> 5 Address: 6 City/State	e/Zip:				
3 Amount 7 Comments	t (optional):				

Schedule D – Returned Expenditures & Contributions

Full Name of Commit	Friends of Angie Bedolla
	Reporting Period Covered: 1/25/23 Through date 10/17/23
(Pr	
PLEASE PRINT/TYPE	
1 <u>Date Accepted</u>	4 Name (Last, First):
2 <u>Date Returned</u>	5 Address: 6 City/State/Zip:
3 Amount \$	7 Purpose:
1 Date Accepted	
1 Date Accepted	4 Name (Last, First):
2 <u>Date Returned</u>	5 Address:
3 Amount	6 City/State/Zip: 7 Purpose:
\$	
	$\frac{\textbf{Returned Expenditures}}{\textbf{viously reported on Schedule } B-Expenditures returned or refunded to the committee)}$
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 Date Expended	
1 Date Expelled	4 Name (Last, First):
2 <u>Date Returned</u>	5 Address:
3 Amount	6 City/State/Zip: 7 Comment (optional):
\$	

Schedule D – Returned Expenditures & Contributions

Full Name of Committ	ee/Person: Friend	ds of Angie Bedolla			
	Ro	eporting Period Covered:	1/25/23 date	Through	10/17/23 date
(Pre	viously reported on Sch	Returned Contribution hedule A – Contributions acce		urned to donors)	
PLEASE PRINT/TYPE					
1 Date Accepted	4 Name (Last, First	t):			
2 <u>Date Returned</u>	5 Address:				
3 Amount	6 City/State/Zip:7 Purpose:				
\$	<u> </u>				
1 <u>Date Accepted</u>	4 Name (Last, First	t):			
2 <u>Date Returned</u>	5 Address:6 City/State/Zip:				
3 Amount \$	7 Purpose:				
(Previ	iously reported on Sche	Returned Expenditures edule B – Expenditures return		the committee)	
PLEASE PRINT/TYPE					
1 <u>Date Expended</u>	4 Name (Last, First	t):			
2 <u>Date Returned</u>	5 Address:6 City/State/Zip:				
3 Amount \$	7 Comment (option	nal):			
1 <u>Date Expended</u>					
2 <u>Date Returned</u>	4 Name (Last, First5 Address:	t):			
2 Suo Retained	6 City/State/Zip:				
3 Amount \$	7 Comment (option	nal):			

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

Full Name of	Committee/Person: Fr	iends of Angie Bedo	lla		
Repor	rting Period Covered:	1/25/23	Through	10/17/23	
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^{*} 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."

Full Name of Committee/Person: Friends of Angie Bedolla					
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Full Name of	Committee/Person:	Friends of Angie Bed	olla	
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Full Name of Committee/Person: Friends of Angie Bedolla				
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Full Name of Committee/Person: Friends of Angie Bedolla				
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Full Name of Committee/Person: Friends of Angie Bedolla				
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Full Name of Committee/Person: Friends of Angie Bedolla				
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Full Name of Committee/Person: Friends of Angie Bedolla				
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Full Name of Committee/Person: Friends of Angie Bedolla				
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