

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



CONDITIONALLY ACCEPTED

DEC 12 2023

Space Below For Office Use Only

THORNTON CITY CLERK

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

Full Name of Committee/Person:	Friends For David Acunto <small>As Shown on Registration</small>
Address of Committee/Person:	PO Box 33445
City, State & Zip Code:	Northglenn, CO 80233
Committee Type:	Candidate Committeee
Name and Address of Financial Institution:	Bellco, 12820 Holly St. Thornton, CO 80602

SOS ID NUMBER (state and county committees ONLY):

N/A

Type of Report:

- Regularly Scheduled Filing.**
 - 21 days prior to the Municipal Election
 - Friday prior to the Municipal Election
 - 30 days after the Municipal Election
 - Annual - candidates from prior election held on

Amended Filing. This amends previous report filed on (date) _____
 Submit changes or new information **ONLY**

Termination Report (Termination Reports **MUST** have a Monetary Balance of Zero in Line 5)

Reporting Period Covered:

10/30/23
date

Through

12/7/23
date

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

\$ N/A

		Totals Detailed Summary Page
1	Funds on Hand at Beginning of Reporting Period (monetary only)	\$562.93
2	Total Monetary Contributions (line 11)	\$750.00
3	Total of Monetary Contributions & Beginning Amount (line 1+ line 2)	\$1,312.93
4	Total Monetary Expenditures (line 19)	\$1,312.93
5	Funds on Hand at End of Reporting Period (monetary) (line 3 - line 4)	\$0.00

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.
 [Art. XXVIII Sect. 10 (2) (a)]

Authorization (Must be completed by either the Registered Agent **OR** the Candidate) I hereby certify and declare, under penalty of perjury, that to the best of my knowledge or belief all contributions received during this reporting period, including any contributions received in the form of membership dues transferred by a membership organization, are from permissible sources.

Print Registered Agent's (Treasurer's) Name: April Acunto
 Registered Agent's (Treasurer's) Signature: *April Acunto* Date: 12/9/23
 Print Candidate Name: David Acunto
 Candidate's Signature: *David Acunto* Date: 12/9/23

DETAILED SUMMARY

Full Name of Committee/Person:

Friends For David Acunto

Current Reporting Period:

10/30/23

Through

12/7/23

Funds on hand at the beginning of reporting period (Monetary Only):		\$562.93
6	Itemized Contributions \$20 or More [CRS 1-45-108(1)(a)] (Please list on Schedule "A")	\$750.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	
8	Loans Received (Please list on Schedule "C")	\$0.00
9	Total of Other Receipts (Interest, Dividends, etc.)	
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$0.00
11	Total Monetary Contributions (Total of lines 6 through 10)	\$750.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$0.00
13	Total Contributions (Line 11 + line 12)	\$750.00
14	Itemized Expenditures \$20 or More [CRS 1-45-108(1)(a)] (Please list on Schedule "B")	\$1,312.93
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 and less)	
16	Loan Repayments Made (Please list on Schedule "C")	\$0.00
17	Returned Contributions (To Donor) (Please list on Schedule "D")	\$0.00
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$1,312.93
20	Total Expenditures (Line 18 + Line 19)	\$1,312.93

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

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

Full Name of Committee/Person: Friends For David Acunto

Reporting Period Covered: 10/30/23 Through _____
date

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

Total Itemized Contributions:

PLEASE PRINT/TYPE

1 <u>Date Accepted</u> 10/30/23	4 Name (Last, First): <u>Industrial Property Rights PAC</u>
2 <u>Contribution Amount</u> \$ 500.00	5 Address: <u>2318 Curtis Street</u>
3 <u>Aggregate Amount*</u> \$	6 City/State/Zip: <u>Denver, CO 80205</u>
	7 Description: <u>Check</u>
	8 Employer (if applicable, <u>mandatory</u>): _____
	9 Occupation (if applicable, <u>mandatory</u>): _____
1 <u>Date Accepted</u> 12/5/23	4 Name (Last, First): <u>Waste Management</u>
2 <u>Contribution Amount</u> \$ 250.00	5 Address: <u>PO Box 3027</u>
3 <u>Aggregate Amount*</u> \$	6 City/State/Zip: <u>Houston, TX 77253</u>
	7 Description: <u>Check</u>
	8 Employer (if applicable, <u>mandatory</u>): _____
	9 Occupation (if applicable, <u>mandatory</u>): _____
1 <u>Date Accepted</u>	4 Name (Last, First): _____
2 <u>Contribution Amount</u> \$	5 Address: _____
3 <u>Aggregate Amount*</u> \$	6 City/State/Zip: _____
	7 Description: _____
	8 Employer (if applicable, <u>mandatory</u>): _____
	9 Occupation (if applicable, <u>mandatory</u>): _____
1 <u>Date Accepted</u>	4 Name (Last, First): _____
2 <u>Contribution Amount</u> \$	5 Address: _____
3 <u>Aggregate Amount*</u> \$	6 City/State/Zip: _____
	7 Description: _____
	8 Employer (if applicable, <u>mandatory</u>): _____
	9 Occupation (if applicable, <u>mandatory</u>): _____

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candi 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

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

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

Full Name of Committee/Person: Friends For David Acunto

Reporting Period Covered: 10/30/23 **Through** _____
date

Total Itemized Expenditures:

PLEASE PRINT/TYPE

1 <u>Date Expended</u> 11/2/23	4 Name (Last, First): <u>Point Blank Political</u>
2 <u>Amount</u> \$ 494.82	5 Address: <u>330 Crown Oak Centre Dr</u> 6 City/State/Zip: <u>Longwood, FL 32750</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	7 Purpose of Expenditure: <u>Text and MMS Messaging</u>

1 <u>Date Expended</u> 11/5/23	4 Name (Last, First): <u>Mail Chimp</u>
2 <u>Amount</u> \$ 13.00	5 Address: <u>675 Ponce De Leon Ave NE</u> 6 City/State/Zip: <u>Atlanta, GA 30308</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	7 Purpose of Expenditure: <u>Email</u>

1 <u>Date Expended</u> 12/5/23	4 Name (Last, First): <u>Cooliage, Tiffany</u>
2 <u>Amount</u> \$ 500.11	5 Address: <u>4050 Chase St</u> 6 City/State/Zip: <u>Wheat Ridge, CO 80212</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	7 Purpose of Expenditure: <u>Consulting.</u>

1 <u>Date Expended</u> 12/5/23	4 Name (Last, First): <u>Egloff, Tanner</u>
2 <u>Amount</u> \$ 305.00	5 Address: <u>9724 E 34th Ave</u> 6 City/State/Zip: <u>Denver, CO 80238</u>
3 <u>Recipient is (optional):</u> <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	7 Purpose of Expenditure: <u>Administrative Work</u>