Elections Division Department of State 1700 Broadway, Stc. 200

Denver, CO 80290

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(303) 894-2200 ext, 6383 (303) 869-4861



CONDITIONALLY: ACCEPTED TO Office Use Only

NOV 14 2023

THORNTON CITY CLERK

REPORT OF CONTRIBUTIONS AND EXPENDITURES

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

Full Name of Committee/Person:	Colorado State Frat	ternal Order	of Police Small Donor
Address of Committee/Person:	8400 Alcott St		
(1)			

Committee Type:	Small Conor		
Name and Address of Financial Institution:	Chase Bank 7401	Folleral	Blud Westminstr, words
SOS ID NUMBER (state and cour	ity committees ONLY):		N/A
Type of Report: Regularly Scheduled Filing. October 17, 2023 (21 days prior to the November 7, 2023 Municipal Election) November 3, 2023 (Friday prior to the November 7, 2023 Municipal Election) December 12, 2023 (35 days after the November 7, 2023 Municipal Election) Annual - candidates from prior election held on Amended Filing. This amends previous report filed on (date) Submit changes or new information ONLY Termination Report (Termination Reports MUST have a Monetary Balance of Zero in Line 5) Reporting Period Covered: Declared Total Spending (if applicable): [Art			lection) ection)
prompton and an arrangement of the second			Totals Detailed Summary Page
1 Funds on Hand at Beginning of Reporting Period (monetary only)			1000.00
2 Total Monetary Contributions (line 11) 1000 3 Total of Monetary Contributions & Beginning Amount (line 1+ line 2) 1024		024.11	
		1000.00	
5 Funds on Hand at End of Reporting Period (monetary) (line 3 - line 4)		24.11.	
The appropriate officer shall impose [Authorization (Must be completed by either the that to the best of my knowledge or belief all conform of membership dues transferred by a member Print Registered Agent's (Treasurer's) Name: Registered Agent's (Treasurer's) Signature:	Art. XXVIII Sect. 10 (2) (a) Registered Agent OR the Candidate tributions received during this report) I hearby certify a ing period, includi	nd declare, under penalty of perjury, ng any contributions received in the
Print Candidate Name:			
Candidate's Signature:		Date	

DETAILED SUMMARY

Full Name of Committee/Person:	Colorado State	Frateral Order A	Police	Small	Donor

Current Reporting Period: [D] [3 23 Through [0] 27 23

Funds on hand at the beginning of reporting period (Monetary Only):

Funds on h	and at the beginning of reporting period (Monetary Only):	
6	Itemized Contributions \$20 or More [CRS 1-45-108(1)(a)] (Please list on Schedule "A")	1000-00
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
13	Total Monetary Contributions (Total of lines 6 through 10)	(000.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$0.00
13	Total Contributions (Line 11 + line 12)	(600.00)
14	Itemized Expenditures \$20 or More [CRS 1-45-108(1)(a)] (Please list on Schedule "B")	1000-00
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)	(000.00
20	Total Monetary Expenditures (Line 18 + Line 19)	(000.00 (000.00_

Full Name of Committ	ee/Person: Colorado State Fraternal Order 1 Police Sind
	Reporting Period Covered: 10 13 23 Through date Through
PLEASE PRINT/TYPE	
2 Contribution Amount \$ 3 Aggregate Amount*	4 Name (Last, First): Verver, Joshua 5 Address: 840 Alcot St 6 City/State/Zip: Westernage (2003) 7 Description 8 Employer (if applicable, mandatory): City of Westernage 9 Occupation (if applicable, mandatory): Law Enforcement
2 Contribution Amount \$ 50.3 Aggregate Amount*	4 Name (Last, First): Watters, Mark 5 Address: 8UV Alcott St. 6 City/State/Zip: Lest Minster Co 8003 7 Description 8 Employer (if applicable, mandatory): City of Westminster 9 Occupation (if applicable, mandatory): City of Westminster
2 Contribution Amount \$ Aggregate Amount*	4 Name (Last, First): Wazny, Michael 5 Address: 8400 Alcott St 6 City/State/Zip: West (vil note) Co 80031 7 Description 8 Employer (if applicable, mandatory): Cty of West monter 9 Occupation (if applicable, mandatory): Law Enterviewent
Date Accepted b 24 23 Contribution Amount S	4 Name (Last, First): Whipple Decek 5 Address: Sylon Alcott St 6 City/State/Zip: Westminster (a 8003) 7 Description 8 Employer (if applicable, mandatory): Color Westminster 9 Occupation (if applicable, mandatory): Can Emfine Meshinster

^{*} 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 Commit	tee/Person: Colorado State Fraternal Order 1 Police Sont
	Reporting Period Covered: 10 13 23 Through 6.25 23
PLEASE PRINT/TYPE	date date
Date Accepted 10 12 23 2 Contribution Amount \$ 3 Aggregate Amount*	4 Name (Last, First): Ushite Zachary 5 Address: 840 Alast St 6 City/State/Zip: Westmader (20 8003) 7 Description 8 Employer (if applicable, mandatory): (17 of westmader) 9 Occupation (if applicable, mandate Law Emforce ment
Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted Date Accepted	4 Name (Last, First): Wilber, John 5 Address: & YUV Alcott St. 6 City/State/Zip: Lastminster, Co 8003/ 7 Description 8 Employer (if applicable, mandatory): City of Westminster 9 Occupation (if applicable, mandatory): City of Westminster 9 Occupation (if applicable, mandatory): City of Westminster
Date Accepted Contribution Amount Aggregate Amount*	4 Name (Last, First): White Blass 5 Address: 8400 Al (off 5) 6 City/State/Zip: Lapest (minster, Cp 8003) 7 Description 8 Employer (if applicable, mandatory): (14 of Westminster) 9 Occupation (if applicable, mandatory): Law Entrument
Date Accepted Date A	4 Name (Last, First): Zehner, Samanha 5 Address: SYOD Alcott St 6 City/State/Zip: Lacstminster, (a 8003) 7 Description 8 Employer (if applicable, mandatory): City A Westminster 9 Occupation (if applicable, mandatory): Care Minister 9 Occupation (if applicable, mandatory): Care Minister

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Full Name of Commit	tee/Person: Colorado State Fraternal Order of Police Sont
	Reporting Period Covered: 10 13 23 Through 6.25 23
PLEASE PRINT/TYPE	date date
1 Date Accepted 10 22 23 2 Contribution Amount \$ 5000 3 Aggregate Amount*	4 Name (Last, First): Wilson, Abigail 5 Address: 840 Alcid St 6 City/State/Zip: INRSTANASTER, CD 8003) 7 Description 8 Employer (if applicable, mandatory): Lity of Westminster 9 Occupation (if applicable, mandatory): Law Enforcement
Date Accepted Date Accepted Contribution Amount Aggregate Amount*	4 Name (Last, First): Williams, Aaron 5 Address: 8400 Alcott St. 6 City/State/Zip: Libstminster, Co 80031 7 Description 8 Employer (if applicable, mandatory): City of Westminster 9 Occupation (if applicable, mandatory): City of Westminster 9 Occupation (if applicable, mandatory): City of Westminster
Date Accepted Contribution Amount Aggregate Amount*	4 Name (Last, First): Wolf, Royald 5 Address: 8400 Alcott St 6 City/State/Zip: 12051 minster, CD 80031 7 Description 8 Employer (if applicable, mandatory): Cty of Westminster 9 Occupation (if applicable, mandatory): Ciw Enforcement
Date Accepted b 24 23 Contribution Amount Aggregate Amount*	4 Name (Last, First): Wood Robert 5 Address: SYOD Alget St 6 City/State/Zip: Westminster (a 8063) 7 Description 8 Employer (if applicable, mandatory): City A Westminster 9 Occupation (if applicable, mandatory): Paw Mira ment

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Full Name of Commit	ee/Person: Colorado State Fraternal Order 1 Police Sin
	Reporting Period Covered: 10 13 23 Through Le 25 23
PLEASE PRINT/TYPE	date date
1 Date Accepted 10 22 23 2 Contribution Amount \$ Aggregate Amount*	4 Name (Last, First): Woods, Trevor 5 Address: 8400 Alcot St 6 City/State/Zip: Westminster, (20 8003) 7 Description 8 Employer (if applicable, mandatory): City of Westminster 9 Occupation (if applicable, mandator) Law Enforce ment
Date Accepted Date Accepted Contribution Amount Aggregate Amount*	4 Name (Last, First): Wright James 5 Address: 8400 Alcott St. 6 City/State/Zip: Lestminster Co 8003/ 7 Description 8 Employer (if applicable, mandatory): City of Westminster 9 Occupation (if applicable, mandatory): City of Westminster
Date Accepted	4 Name (Last. First): Wight ton 5 Address: Sylve Allot St 6 City/State/Zip: Lapest (NInster, Co 8003) 7 Description 8 Employer (if applicable, mandatory): City of Westminster 9 Occupation (if applicable, mandatory): Law Enforcement
Date Accepted Date Accepted Contribution Amount Aggregate Amount*	4 Name (Last, First): We christopher 5 Address: Sydd Alcott St 6 City/State/Zip: Liestminster, Co 80831 7 Description 8 Employer (if applicable, mandatory): Cat A Westminster 9 Occupation (if applicable, mandatory): Car Mirror ment

^{*} 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 Commit	tee/Person: Colorado State Fraternal Order 1 Police Soul
	Reporting Period Covered: 10 13 23 Through 10 25 23
PLEASE PRINT/TYPE	date date
Date Accepted Date Accepted Date Accepted Date Accepted	4 Name (Last, First): Wartz Jilian 5 Address: 844 Alast St 6 City/State/Zip: Westwarder (20 8003)
\$ 5000	7 Description
3 Aggregate Amount*	8 Employer (if applicable. mandatory): [1] of Westminster
\$	9 Occupation (if applicable, mandate Law Enforce ment
2 Contribution Amount \$ 3 Aggregate Amount*	4 Name (Last, First): Xi ong, Yut; tham 5 Address: 840 Alcott St. 6 City/State/Zip: Lobstminstur, CD 8003/ 7 Description 8 Employer (if applicable, mandatory): City of Westminster
\$,	9 Occupation (if applicable, mandatory): City of Westminster 9 Occupation (if applicable, mandatory): City of Westminster
Date Accepted V 13 2 Contribution Amount \$ 3 Aggregate Amount*	4 Name (Last. First): Youngs, Kyle 5 Address: Sylva Allott St 6 City/State/Zip: Lapst (MInster, Co 8003) 7 Description 8 Employer (if applicable, mandatory): (Ayd Westminster) 9 Occupation (if applicable, mandatory): Law Enterded
Date Accepted D 26 23 Contribution Amount S 50,	4 Name (Last, First): Zborowski, Brandon 5 Address: Sylv Alut St 6 City/State/Zip: Liestminster, Co 8023/ 7 Description
3 Aggregate Amount* \$	9 Occupation (if applicable, mandatory): Company Co

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Full Name of Committee	Person: Colorado State Fraterno Order of Police Small Donor
	Reporting Period Covered: [0 13 22 Through [0 29 23]
	date
PLEASE PRINT/TYPE	
Date Expended	4 Name (Last, First): Friends for Dave Acunto
2 Amount	5 Address:
\$ 1000,00	6 City/State/Zip:
3 Recipient is (optional):	
Committee	7 Purpose of Expenditure: Campaign Contribution
Non-Committee	
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	
T BOT BOOKER	4. Name (Least First)
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	
I De Deserva	4. Name (Logt First)
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	N N