

RECEIVED

DEC 13 2022

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TOWN OF PARKER

Colorado Secretary of State
Elections Division
1700 Broadway, Ste. 200
Denver, CO 80290
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Fax: (303) 869-4861
Email: cphelp@sos.state.co.us
www.sos.state.co.us



REPORT OF CONTRIBUTIONS AND EXPENDITURES

Article XXVIII of the Colorado Constitution and Tital 1, Article 45 of the Colorado Revised Statute (C.R.S.)

Full Name of Committee/Person:	Committee to Elect Joshua Rivero <small>As Shown On Registration</small>
Address of Committee/Person:	12089 South Talkid Court
City, State & Zip Code:	Parker CO. 80138
Committee Type:	
Name and Address of Financial Institution	Champion Bank 16790 Centre Ct Parker CO 80138

COMMITTEE ID NUMBER

Type of Report

- Regularly Scheduled Filing.
- 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)
- Check this box if this Report Contains Electioneering Communications Information

Reporting Period Covered: Date **Through** Date

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

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$2015.60
2	Total Monetary Contributions (line 11)	\$2500.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$4515.60
4	Total Monetary Expenditures (line 19)	\$3282.15 <i>JR</i>
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$933.45

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.
[Art. XXVIII Sec. 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 Name: Joshua R Rivero
 Registered Agent's Signature: Date: 12/13/2022
 Print Candidate Name: Joshua Rivero
 Candidates Signature: Date: 12/13/2022

DETAILED SUMMARY

Full Name of Committee/Person: Committee to Elect Joshua Rivero

Current Reporting Period: 10/31/2022

Through 12/03/2022

Funds on hand at the beginning of reporting period (Monetary Only)		\$2015.60
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "A")	\$2500.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$0.00
8	Loans Received (From Schedule "C")	0.00 \$
9	Total of Other Receipts (Interest, Dividends, etc.)	\$0.00
10	Returned Expenditures (from recipient) (From Schedule "D")	\$0.00
11	Total Monetary Contributions (Total of lines 6 through 10)	2500.00 \$
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$0.00
13	Total Contributions (Line 11 + line 12)	4515.60 \$
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$3582.15 JK
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$0.00
16	Loan Repayments Made (From Schedule "C")	0.00 \$
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$0.00
18	Total Coordinated Non-Monetary (in-kind) Expenditures (Candidate/Candidate Committee & Political Parties only)	\$0.00
19	Total Monetary Expenditures (Total of lines 14 through 17)	3582.15 JK \$
20	Total Spending (Line 18 + line 19)	3582.15 JK \$

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

1

Full Name of Committee/Person: Committee to Elect Joshua Rivero

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 11/04	4. Name (Last, First): <u>Andersson, Birgitta M.</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>3690 Camels View</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs CO 80904</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>retiree</u>

1. <u>Date Accepted</u> 11/04	4. Name (Last, First): <u>Andersson, Kjell S.</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>3690 Camels View</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs Co 80904</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>retiree</u>

1. <u>Date Accepted</u> 11/15/2022	4. Name (Last, First): <u>O'Malley, Brian</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>10561 E Arrowhead Ln.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Parker CO 80138</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>retiree</u>

1. <u>Date Accepted</u> 11/15/2022	4. Name (Last, First): <u>Wall, Peter</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>142 S. Jackson</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Denver CO 80209</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>The Wall Group</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Government Affairs</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)

1

Full Name of Committee/Person: Committee to Elect Joshua Rivero

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 11/04/2022	4. Name (Last, First): <u>Klien, Andrew</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>4100 E Mississippi Ave #500</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Denver CO 80246</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Westside Investment Partners</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Principal</u>

1. <u>Date Accepted</u> 11/04/2022	4. Name (Last, First): <u>Jacobson, Lawrence</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>6270 S Carson St</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Centennial CO 80111</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Westside Investment Partners</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Principal</u>

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</u> \$	5. Address: _____
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	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 Amt.</u> \$	5. Address: _____
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	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: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

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

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

Full Name of Committee/Person: Committee to Elect Joshua Rivero

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 11/29/2022	4. Name: <u>Committee to Elect Anne Barrington</u>
2. <u>Amount</u> \$ 323.49	5. Address: <u>10816 Eagle Crest Ct</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Parker CO 80138</u>
	7. Purpose of Expenditure: <u>shared campaign expenses</u> <input checked="" type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11/15/2022	4. Name: <u>PayPal Inc.</u>
2. <u>Amount</u> \$ 45.32	5. Address: <u>2211 N 1st St.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>San Jose CA 95131</u>
	7. Purpose of Expenditure: <u>processing fees</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11/06/2022	4. Name: <u>Committee to Elect Brandi Wilks</u>
2. <u>Amount</u> \$ 855.02	5. Address: <u>22104 E Idyllwilde Dr</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Parker CO 80138</u>
	7. Purpose of Expenditure: <u>shared sign cost</u> <input checked="" type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 12/01/2022	4. Name: <u>WR Communications</u>
2. <u>Amount</u> \$ 2358.32	5. Address: <u>1600 Broadway #1350</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver CO 80202</u>
	7. Purpose of Expenditure: <u>campaign texts</u> <input checked="" type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

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NOV - 4 2022

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REPORT OF CONTRIBUTIONS AND EXPENDITURES

Article XXVIII of the Colorado Constitution and Tital 1, Article 45 of the Colorado Revised Statute (C.R.S.)

Full Name of Committee/Person:	Committee to Elect Joshua Rivero <small>As Shown On Registration</small>
Address of Committee/Person:	12089 S Talkid Ct
City, State & Zip Code:	Parker, CO 80138
Committee Type:	
Name and Address of Financial Institution	Champion Bank 16790 Centre Ct Parker CO 80138

COMMITTEE ID NUMBER

[Empty box for Committee ID Number]

Type of Report

- Regularly Scheduled Filing.
- Amended Filing. This amends previous report filed on (date) [Empty box]
Submit changes or new information ONLY
- Termination Report. (Termination Reports MUST Have a Monetary Balance of Zero in Line 5)
- Check this box if this Report Contains Electioneering Communications Information

Reporting Period Covered: 10/14/2022 Date Through 10/30/2022 Date

Declared Total Spending (if applicable) [Art. XXVIII, Sec. 4(1)] \$ [Empty box]

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$515.60
2	Total Monetary Contributions (line 11)	\$1500.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$2015.60
4	Total Monetary Expenditures (line 19)	\$0.00
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$2015.60

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late. [Art. XXVIII Sec. 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 Name: Joshua Rivero

Registered Agent's Signature: [Signature] Date: 10/18/2022

Print Candidate Name: Joshua Rivero

Candidates Signature: [Signature] Date: 10/18/2022

DETAILED SUMMARYFull Name of Committee/Person: Committee to Elect Joshua RiveroCurrent Reporting Period: 10/14/2022Through 10/30/2022

	Funds on hand at the beginning of reporting period (Monetary Only)	\$0.00
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "A")	\$1500.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$0.00
8	Loans Received (From Schedule "C")	0.00 \$
9	Total of Other Receipts (Interest, Dividends, etc.)	\$0.00
10	Returned Expenditures (from recipient) (From Schedule "D")	\$0.00
11	Total Monetary Contributions (Total of lines 6 through 10)	1500.00 \$
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$0.00
13	Total Contributions (Line 11 + line 12)	1500.00 \$
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$0.00
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$0.00
16	Loan Repayments Made (From Schedule "C")	0.00 \$
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ 0.00
18	Total Coordinated Non-Monetary (in-kind) Expenditures (Candidate/Candidate Committee & Political Parties only)	\$0.00
19	Total Monetary Expenditures (Total of lines 14 through 17)	0.00 \$
20	Total Spending (Line 18 + line 19)	0.00 \$

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

1

Full Name of Committee/Person: Committee to Elect Joshua Rivero

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/15/2022	4. Name (Last, First): <u>Metro Housing Coalition Political Committee</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>9033 E. Easter Place</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Centennial, CO 80112</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>n/a</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>n/a</u>

1. <u>Date Accepted</u> 10/16/2022	4. Name (Last, First): <u>Consumer Fireworks Safety Asn Political Action Committee</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>PO Box 1436</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Tacoma, WA 98401-1436</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>n/a</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>n/a</u>

1. <u>Date Accepted</u> 10/17/2022	4. Name (Last, First): <u>Stephen L. Brown</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>4958 Bayou Hills Rd.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Parker, CO 80134-5156</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Law Firm of Brown & Taylor, PC</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Attorney</u>

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</u> \$	5. Address: _____
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	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: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

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

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

Full Name of Committee/Person: Committee to Elect Joshua Rivero

PLEASE PRINT/TYPE

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

Schedule C - Loans

Candidate Committees only

Full Name of Committee/Person: _____

LOANS - Loans Owed by the Committee

(Use a separate schedule for each loan. This form is for line item 8 and 16 of the Detailed Summary Report.)
[No information copied from such reports shall be sold or used by any person for the purpose of soliciting contributions or for any commercial purpose. [Art. XXVIII, Sec. 9(e)] Notwithstanding any other section of this article to the contrary, a candidate's candidate committee may receive a loan from a financial institution organized under state or federal law if the loan bears the usual and customary interest rate, is made on a basis that assures repayment, is evidenced by a written instrument, and is subject to a due date or amortization schedule [Art. XXVIII, Sec. 3(8)]

LOAN SOURCE

Name (Last, First or Institution): _____

Address: _____

City/State/Zip: _____

Original Amount of Loan: \$ _____ Interest Rate: _____

Loan Amount Received This Reporting Period: \$ _____

Total of All Loans This Reporting Period: \$ _____
(Place on line 8 of Detailed Summary Report)

Principal Amount Paid This Reporting Period: \$ _____

Interest Amount Paid This Reporting Period: \$ _____

Amount Repaid This Reporting Period: \$ _____
(Amount Repaid is sum of Principal & Interest entered on Detail Summary)

Total Repayments Made: \$ _____
(Sum of Schedule C pages, Place on line 16 of Detailed Summary)

Outstanding Balance: \$ _____

TERMS OF LOAN: _____
Date Loan Received Due Date for Final Payment

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, City, State, Zip	Amount Guaranteed

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: _____

Returned Contributions

(Previously reported on Schedule A – Contributions accepted and then returned to donors)

PLEASE PRINT/TYPE

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Purpose: _____

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Purpose: _____

Returned Expenditures

(Previously reported on Schedule B – Expenditures returned or refunded to the committee)

PLEASE PRINT/TYPE

1. <u>Date Expended</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Comment (Optional): _____

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): _____

Statement of Non-Monetary Contributions
 [Art. XXVIII, Sec. 2(5)(a)(II)(III) & Sec. 5(3) & 1-45-108(1), C.R.S.]

Full Name of Committee/Person: _____

PLEASE PRINT/TYPE

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</u> \$	5. Address: _____
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</u> \$	5. Address: _____
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</u> \$	5. Address: _____
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

* Note: If coordinated, then contribution must also be reported as a non-monetary expenditure on Detailed Summary. Art. XXVIII, Sec. 2(9) states: "...Expenditures that are controlled by or coordinated with a candidate or candidate's agent are deemed to be both contributions by the maker of the expenditures, and expenditures by the candidate committee."

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OCT 18 2022

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TOWN OF PARKER

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Article XXVIII of the Colorado Constitution and Tital 1, Article 45 of the Colorado Revised Statute (C.R.S.)

Full Name of Committee/Person:	Committee to Elect Joshua Rivero
<small>As Shown On Registration</small>	
Address of Committee/Person:	12089 S Talkid Ct
City, State & Zip Code:	Parker, CO 80138
Committee Type:	
Name and Address of Financial Institution	Champion Bank 16790 Centre Ct Parker CO 80138

COMMITTEE ID NUMBER

Type of Report

- Regularly Scheduled Filing.
- 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)
- Check this box if this Report Contains Electioneering Communications Information

Reporting Period Covered: **Through**
Date Date

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

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$0.00
2	Total Monetary Contributions (line 11)	\$1600.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$1600.00
4	Total Monetary Expenditures (line 19)	\$1084.40
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$515.60

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.
[Art. XXVIII Sec. 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 Name: Joshua Rivero

Registered Agent's Signature: Date: 10/18/2022

Print Candidate Name: Joshua Rivero

Candidates Signature: Date: 10/18/2022

DETAILED SUMMARY

Full Name of Committee/Person: Committee to Elect Joshua Rivero

Current Reporting Period: 10/28/2021 **Through** 10/13/2022

	Funds on hand at the beginning of reporting period (Monetary Only)	\$0.00
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "A")	\$1600.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$0.00
8	Loans Received (From Schedule "C")	0.00 \$
9	Total of Other Receipts (Interest, Dividends, etc.)	\$0.00
10	Returned Expenditures (from recipient) (From Schedule "D")	\$0.00
11	Total Monetary Contributions (Total of lines 6 through 10)	1600.00 \$
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$0.00
13	Total Contributions (Line 11 + line 12)	1600.00 \$
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$1084.40
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$0.00
16	Loan Repayments Made (From Schedule "C")	0.00 \$
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$0.00
18	Total Coordinated Non-Monetary (in-kind) Expenditures (Candidate/Candidate Committee & Political Parties only)	\$0.00
19	Total Monetary Expenditures (Total of lines 14 through 17)	1084.40 \$
20	Total Spending (Line 18 + line 19)	1084.40 \$

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

1

Full Name of Committee/Person: Committee to Elect Joshua Rivero

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 08/31/2022	4. Name (Last, First): <u>Realtor Candidate Political Action Committee</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>309 Inverness Way</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Englewood CO 80112</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>n/a</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>n/a</u>

1. <u>Date Accepted</u> 09/14/2022	4. Name (Last, First): <u>Marshall, James E</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>9591 E Hidden Hill Ln</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Lone Tree Co 80124</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>self employed</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>land developer/consultant</u>

1. <u>Date Accepted</u> 09/21/2022	4. Name (Last, First): <u>Marshall, Shelley D</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>9591 E Hidden Hill Ln</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Lone Tree Co 80124</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>retiree</u>

1. <u>Date Accepted</u> 09/24/2022	4. Name (Last, First): <u>Thompson, John R II</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>5595 N Quinlin Ct</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Parker Co 80134</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>retiree</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 B – Itemized Expenditures Statement (\$20 or more)

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

Full Name of Committee/Person: Committee to Elect Joshua Rivero

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 10/08/2022	4. Name: <u>Committee to Elect Brandi Wilks</u>
2. <u>Amount</u> \$ 1084.40	5. Address: <u>22104 E Idylwilde Dr</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Parker CO 80138</u>
	7. Purpose of Expenditure: <u>1/3 of campaign signs</u>
	<input checked="" type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____
	<input type="checkbox"/> Check box if Electioneering Communication