

Colorado Secretary of State
Elections Division
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Space Below For Office Use Only

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

Full Name of Committee/Person:	Jordan Fu Arvada
Address of Committee/Person:	7120 Coors Ct.
City, State & Zip Code:	Arvada, CO, 80004
Committee Type:	Candidate Committee
Name and Address of Financial Institution:	First Bank 6355 Ward Rd. Arvada, CO, 80004

SOS ID NUMBER (state and county committees):

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: 09/19/2017 Through 10/12/2017
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)	\$ 251.36
2	Total Monetary Contributions (line 11)	\$ 2,530.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 2,781.36
4	Total Monetary Expenditures (line 19)	\$ 1,696.41
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 1,084.95

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: _____

Registered Agent's Signature: _____ Date: _____

Print Candidate Name: Jordan Hohenstein

Candidates Signature: J-H-A Date: 10/17/2017

DETAILED SUMMARY

Full Name of Committee/Person: Jordan Fur Arvadon

Current Reporting Period: 09/19/2017 Through 10/12/2017

Funds on hand at the beginning of reporting period (Monetary Only)		\$ 251.36
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 2,530.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 0
8	Loans Received (Please list on Schedule "C")	\$ 0
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ 0
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ 0
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 2,530.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 0
13	Total Contributions (Line 11 + line 12)	\$ 2,530.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 1,696.41
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 0
16	Loan Repayments Made (Please list on Schedule "C")	\$ 0
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ 0
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ 0
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 1,696.41
20	Total Spending (Line 18 + line 19)	\$ 1,696.41

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

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

Full Name of Committee/Person: Jordan Fer Arvada

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

PLEASE PRINT/TYPE

1. Date Accepted <u>09/20/17</u>	4. Name (Last, First): <u>Nixon, Nancy</u>
2. Contribution Amt. \$ <u>25.00</u>	5. Address: <u>6440 Ingalls St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Arvada / CO / 80003</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>online</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>09/20/17</u>	4. Name (Last, First): <u>Coors, Scott</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>3200 Ohio Way</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Denver, CO, 80209</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>online</u>
	8. Employer (if applicable, mandatory): <u>ALeco Container, LLC</u>
	9. Occupation (if applicable, mandatory): <u>Executive</u>

1. Date Accepted <u>09/21/17</u>	4. Name (Last, First): <u>Smallwood, Zachael</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>6108 Rountt Ct.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Arvada / CO / 80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Shavnee Gardens</u>
	9. Occupation (if applicable, mandatory): <u>Coregner</u>

1. Date Accepted <u>09/21/17</u>	4. Name (Last, First): <u>Stevens, Shirley</u>
2. Contribution Amt. \$ <u>25.00</u>	5. Address: <u>8640 Calvin Dr.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Arvada / CO / 80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>online</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</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)

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

Full Name of Committee/Person: Jordan Fur Anada

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

PLEASE PRINT/TYPE

1. Date Accepted <u>09/22/17</u>	4. Name (Last, First): <u>McGrath, Bob</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>11166 W. 78th Drive</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Anada/CO/80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>online</u>
	8. Employer (if applicable, mandatory): <u>DISH Network</u>
	9. Occupation (if applicable, mandatory): <u>Marketing</u>

1. Date Accepted <u>09/24/17</u>	4. Name (Last, First): <u>Larson, Marilyn Beth</u>
2. Contribution Amt. \$ <u>500.00</u>	5. Address: <u>17794 W. 77th Lane</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Anada/CO/80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>online</u>
	8. Employer (if applicable, mandatory): <u>Self</u>
	9. Occupation (if applicable, mandatory): <u>Business owner</u>

1. Date Accepted <u>09/27/17</u>	4. Name (Last, First): <u>Kupernik, Robin</u>
2. Contribution Amt. \$ <u>25.00</u>	5. Address: <u>10433 W. 62nd Ave.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Anada/CO/80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>online</u>
	8. Employer (if applicable, mandatory): <u>Kaiser Permanente</u>
	9. Occupation (if applicable, mandatory): <u>Manager</u>

1. Date Accepted <u>10/01/17</u>	4. Name (Last, First): <u>Seaboldt, Kenneth</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>6383 Utica St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Anada/CO/80003</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Spirit Airlines</u>
	9. Occupation (if applicable, mandatory): <u>Flight Attendant</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)

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

Full Name of Committee/Person: Jordan Fur Awada

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/02/17</u>	4. Name (Last, First): <u>Wolford, Rodney</u>
2. Contribution Amt. \$ <u>500.00</u>	5. Address: <u>17794 W 77th Lane</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Arvada / CO / 80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Self</u>
	9. Occupation (if applicable, mandatory): <u>Business owner</u>

1. Date Accepted <u>10/02/17</u>	4. Name (Last, First): <u>Rose, Taylor</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>11870 W 70th PL.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Arvada / CO / 80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>ibotta</u>
	9. Occupation (if applicable, mandatory): <u>Software Developer</u>

1. Date Accepted <u>10/04/17</u>	4. Name (Last, First): <u>Lane, Brittany</u>
2. Contribution Amt. \$ <u>10.00</u>	5. Address: <u>7541 Terry Ct.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Arvada / CO / 80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>UNC</u>
	9. Occupation (if applicable, mandatory): <u>Professor</u>

1. Date Accepted <u>10/04/17</u>	4. Name (Last, First): <u>Renicker, Heather Arnold</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>8001 W. 57th Ave.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Arvada / CO / 80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Self</u>
	9. Occupation (if applicable, mandatory): <u>Consultant</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)

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

Full Name of Committee/Person: Jordan Fur Avada

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/06/17</u>	4. Name (Last, First): <u>Stevens, Shirley</u>
2. Contribution Amt. \$ <u>25.00</u>	5. Address: <u>8640 Calvin Dr.</u>
3. Aggregate Amt. * \$ <u>50.00</u>	6. City/State/Zip: <u>Avada/CO/80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>10/07/17</u>	4. Name (Last, First): <u>Everson, Courtney</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>6805 W. 55th Pl.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Avada/CO/80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Midwest College of Utah</u>
	9. Occupation (if applicable, mandatory): <u>Professor</u>

1. Date Accepted <u>10/08/17</u>	4. Name (Last, First): <u>Kupernik, Robin</u>
2. Contribution Amt. \$ <u>25.00</u>	5. Address: <u>10433 W. 62nd Ave.</u>
3. Aggregate Amt. * \$ <u>50.00</u>	6. City/State/Zip: <u>Avada/CO/80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Kaiser Permanente</u>
	9. Occupation (if applicable, mandatory): <u>Manager</u>

1. Date Accepted <u>10/08/17</u>	4. Name (Last, First): <u>Mitcham, Emilie</u>
2. Contribution Amt. \$ <u>25.00</u>	5. Address: <u>5461 W. 41st Ave.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Denver/CO/80212</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Self</u>
	9. Occupation (if applicable, mandatory): <u>Mediator</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)

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

Full Name of Committee/Person: Jordan For Avada

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/12/17</u>	4. Name (Last, First): <u>Arnold, Karen</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>8201 W. 67th Dr.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Avada / CO / 80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>10/12/17</u>	4. Name (Last, First): <u>Pinkerman, Chad</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>1731 Grove St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Denver / CO / 80204</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Self</u>
	9. Occupation (if applicable, mandatory): <u>Self</u>

1. Date Accepted <u>10/12/17</u>	4. Name (Last, First): <u>Mitcham, Emilie</u>
2. Contribution Amt. \$ <u>15.00</u>	5. Address: <u>5461 W 41st Ave.</u>
3. Aggregate Amt. * \$ <u>40.00</u>	6. City/State/Zip: <u>Denver / CO / 80212</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Self</u>
	9. Occupation (if applicable, mandatory): <u>mediator</u>

1. Date Accepted <u>10/12/17</u>	4. Name (Last, First): <u>Anton, Janet</u>
2. Contribution Amt. \$ <u>75.00</u>	5. Address: <u>6694 Kline St.</u>
3. Aggregate Amt. * \$ <u>75.00</u>	6. City/State/Zip: <u>Avada / CO / 80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

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

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

Full Name of Committee/Person: Jordan For Arvada

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/12/17</u>	4. Name (Last, First): <u>Scaboldt, Kenneth</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>6383 Utica St.</u>
3. Aggregate Amt. * \$ <u>200.00</u>	6. City/State/Zip: <u>Arvada / CO / 80003</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Spirit Airlines</u>
	9. Occupation (if applicable, mandatory): <u>Flight Attendant</u>

1. Date Accepted <u>10/12/17</u>	4. Name (Last, First): <u>Vincenti, Joanna</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>5252 Arbutus St.</u>
3. Aggregate Amt. * \$ <u>75.00</u>	6. City/State/Zip: <u>Arvada / CO / 80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>10/12/17</u>	4. Name (Last, First): <u>Stevens, Shirley</u>
2. Contribution Amt. \$ <u>25.00</u>	5. Address: <u>8640 Calvin Dr.</u>
3. Aggregate Amt. * \$ <u>50.00</u>	6. City/State/Zip: <u>Arvada / CO / 80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>10/12/17</u>	4. Name (Last, First): <u>Wisneski, Alison</u>
2. Contribution Amt. \$ <u>25.00</u>	5. Address: <u>6043 Holland St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Arvada / CO / 80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Bamboobres</u>
	9. Occupation (if applicable, mandatory): <u>Social media + Content Director</u>

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

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

Full Name of Committee/Person: Jordan For Arvada

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/12/17</u>	4. Name (Last, First): <u>Smallwood, Rachael</u>
2. Contribution Amt. \$ <u>30.00</u>	5. Address: <u>6108 Routh Ct.</u>
3. Aggregate Amt. * \$ <u>130.00</u>	6. City/State/Zip: <u>Arvada / CO / 80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Shawnee Gardens</u>
	9. Occupation (if applicable, mandatory): <u>Caregiver</u>

1. Date Accepted <u>10/12/17</u>	4. Name (Last, First): <u>Malone, Pat</u>
2. Contribution Amt. \$ <u>25.00</u>	5. Address: <u>9710 W. 82nd Place</u>
3. Aggregate Amt. * \$ <u>125.00</u>	6. City/State/Zip: <u>Arvada / CO / 80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>10/12/17</u>	4. Name (Last, First): <u>Larson, Marilyn Beth</u>
2. Contribution Amt. \$ <u>250.00</u>	5. Address: <u>177794 W 77th Lane</u>
3. Aggregate Amt. * \$ <u>750.00</u>	6. City/State/Zip: <u>Arvada / CO / 80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Self</u>
	9. Occupation (if applicable, mandatory): <u>Business Owner</u>

1. Date Accepted <u>10/12/17</u>	4. Name (Last, First): <u>Fculner, Jacqueline</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>6038 Owens St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Arvada / CO / 80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>The Colorado Artisan Group, LLC</u>
	9. Occupation (if applicable, mandatory): <u>Member/Manager</u>

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

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

Full Name of Committee/Person: Jordan For Anada

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/12/17	4. Name (Last, First): <u>Kupernik, Robin</u>
2. <u>Contribution Amt.</u> \$ <u>25.00</u>	5. Address: <u>10433 W 62nd Ave</u>
3. <u>Aggregate Amt. *</u> \$ <u>75.00</u>	6. City/State/Zip: <u>Anada / CO / 80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online</u>
	8. Employer (if applicable, mandatory): <u>Kaiser Permanente</u>
	9. Occupation (if applicable, mandatory): <u>Manager</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, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

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, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

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, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

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

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

Full Name of Committee/Person: Jordan For Anada

PLEASE PRINT/TYPE

1. Date Expended <u>09/20/17</u>	4. Name: <u>FedEx Office</u>
2. Amount \$ <u>2.11</u>	5. Address: <u>5455 Wadsworth Bypass</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Anada / CO / 80002</u>
	7. Purpose of Expenditure: <u>Flyer printing</u>
	<input checked="" type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>09/25/17</u>	4. Name: <u>FedEx Office</u>
2. Amount \$ <u>23.16</u>	5. Address: <u>5455 Wadsworth Bypass</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Anada / CO / 80002</u>
	7. Purpose of Expenditure: <u>Flyer printing</u>
	<input checked="" type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>09/24/17</u>	4. Name: <u>Jordan Hohenstein (self)</u>
2. Amount \$ <u>44.66</u>	5. Address: <u>7120 Coors Ct.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Anada / CO / 80004</u>
	7. Purpose of Expenditure: <u>Refund to candidate for website expenses</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>09/26/17</u>	4. Name: <u>FedEx Office</u>
2. Amount \$ <u>35.21</u>	5. Address: <u>10141 Wadsworth Pkwy. #100</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Westminster / CO / 80021</u>
	7. Purpose of Expenditure: <u>Flyer printing</u>
	<input checked="" type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>09/27/17</u>	4. Name: <u>Jordan Hohenstein (self)</u>
2. Amount \$ <u>25.02</u>	5. Address: <u>7120 Coors Ct.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Anada / CO / 80004</u>
	7. Purpose of Expenditure: <u>Refund to candidate for Facebook Ads</u>
	<input type="checkbox"/> Check box if Electioneering Communication

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

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

Full Name of Committee/Person: Jordan For Anvada

PLEASE PRINT/TYPE

1. Date Expended <u>09/28/17</u>	4. Name: <u>Signsonthecheap.com</u>
2. Amount <u>\$ 210.32</u>	5. Address: <u>11525 A Stonehollow Dr. Suite 10c</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Austin / TX / 78758</u>
	7. Purpose of Expenditure: <u>Yard Signs</u>
	<input checked="" type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>09/29/17</u>	4. Name: <u>FedEx Office</u>
2. Amount <u>\$ 17.54</u>	5. Address: <u>5455 Wedsworth Bypass</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Anvada / CO / 80002</u>
	7. Purpose of Expenditure: <u>Flyer printing</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/02/17</u>	4. Name: <u>Vista Print</u>
2. Amount <u>\$ 110.90</u>	5. Address: <u>95 Hayden Ave.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Lexington / MA / 02421</u>
	7. Purpose of Expenditure: <u>Postcards</u>
	<input checked="" type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/02/17</u>	4. Name: <u>Vista Print</u>
2. Amount <u>\$ 112.27</u>	5. Address: <u>95 Hayden Ave.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Lexington / MA / 02421</u>
	7. Purpose of Expenditure: <u>Postcards</u>
	<input checked="" type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/02/17</u>	4. Name: <u>The Printery Inc. Anvada</u>
2. Amount <u>\$ 187.75</u>	5. Address: <u>5735 Independence St.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Anvada / CO / 80002</u>
	7. Purpose of Expenditure: <u>Bulk flyer printing</u>
	<input type="checkbox"/> Check box if Electioneering Communication

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

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

Full Name of Committee/Person: Jordan For Anvada

PLEASE PRINT/TYPE

1. Date Expended <u>10/05/17</u>	4. Name: <u>Jordan Hohenstein (self)</u>
2. Amount <u>\$ 68.00</u>	5. Address: <u>2120 Coors ct.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Anvada / CO / 80004</u>
	7. Purpose of Expenditure: <u>Facebook Ads fee refund to candidate</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/05/17</u>	4. Name: <u>Strengthening Democracy</u>
2. Amount <u>\$ 25.00</u>	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver / CO</u>
	7. Purpose of Expenditure: <u>Fee to attend leadership summit</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/08/17</u>	4. Name: <u>Global Pacific Parking, LLC</u>
2. Amount <u>\$ 2.00</u>	5. Address: <u>2150 California St.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver / CO / 80202</u>
	7. Purpose of Expenditure: <u>Expenditure for campaign summit parking</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/08/17</u>	4. Name: <u>Shell Oil</u>
2. Amount <u>\$ 16.03</u>	5. Address: <u>12401 W. 64th Ave.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Anvada / CO / 80004</u>
	7. Purpose of Expenditure: <u>Mileage / Fuel reimbursement</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/09/17</u>	4. Name: <u>The Home Depot</u>
2. Amount <u>\$ 15.85</u>	5. Address: <u>5215 Wadsworth Blvd.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Anvada / CO / 80002</u>
	7. Purpose of Expenditure: <u>Zip ties for Banners</u>
	<input type="checkbox"/> Check box if Electioneering Communication

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

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

Full Name of Committee/Person: Jordan Fur Anvada

PLEASE PRINT/TYPE

1. Date Expended <u>10/10/17</u>	4. Name: <u>USPS</u>
2. Amount <u>\$ 170.00</u>	5. Address: <u>7765 Wadsworth Blvd.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Anvada / CO / 80003</u>
	7. Purpose of Expenditure: <u>Postage/stamps</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/10/17</u>	4. Name: <u>USPS</u>
2. Amount <u>\$ 170.00</u>	5. Address: <u>7765 Wadsworth Blvd.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Anvada / CO / 80003</u>
	7. Purpose of Expenditure: <u>Postage / stamps</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/11/17</u>	4. Name: <u>Michaela Witter</u>
2. Amount <u>\$ 20.00</u>	5. Address: <u>15572 W. 65th Ave.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Anvada / CO / 80007</u>
	7. Purpose of Expenditure: <u>Photography Payment</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/10/17</u>	4. Name: <u>Alpha Graphics</u>
2. Amount <u>\$ 297.60</u>	5. Address: <u>8290 W. 80th Ave. #3</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Anvada / CO / 80005</u>
	7. Purpose of Expenditure: <u>Banners</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/12/17</u>	4. Name: <u>Global Pacific Parking, LLC</u>
2. Amount <u>\$ 2.00</u>	5. Address: <u>2150 California St</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver / CO / 80202</u>
	7. Purpose of Expenditure: <u>Parking fee for campaign event</u>
	<input type="checkbox"/> Check box if Electioneering Communication

Schedule B – Itemized Expenditures Statement (\$20 or more)
 [1-45-108(1)(a), C.R.S.]

Full Name of Committee/Person: Jordan For Arvada

PLEASE PRINT/TYPE

1. Date Expended <u>10/12/17</u>	4. Name: <u>Office Max</u>
2. Amount \$ <u>9.71</u>	5. Address: <u>5275 Wadsworth Bypass</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Arvada / CO / 80002</u>
	7. Purpose of Expenditure: <u>Campaign Supplies (pens, folders)</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/12/17</u>	4. Name: <u>Raise The Money</u>
2. Amount \$ <u>131.28</u>	5. Address: <u>P.O. Box 26466</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Little Rock, AR, 72221</u>
	7. Purpose of Expenditure: <u>Fees for fundraising platform</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended	4. Name: _____
2. Amount \$	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. Date Expended	4. Name: _____
2. Amount \$	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. Date Expended	4. Name: _____
2. Amount \$	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