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Colorado Secretary of State
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REPORT OF CONTRIBUTIONS AND EXPENDITURES

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

Full Name of Committee/Person:	Jordan For Arvada <small>As Shown On Registration</small>
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

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)	\$967.38
2 Total Monetary Contributions (line 11)	\$1,470.00
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$2,437.38
4 Total Monetary Expenditures (line 19)	\$620.61
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$1,816.77

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: Jordan Hohenstein

Registered Agent's Signature: Date: 10/15/2019

Print Candidate Name: Jordan Hohenstein

Candidates Signature: Date: 10/15/2019

DETAILED SUMMARY

Full Name of Committee/Person: Jordan For Arvada

Current Reporting Period: 09/19/2019

Through 10/10/2019

	Funds on hand at the beginning of reporting period (Monetary Only)	\$967.38
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "A")	\$1,470.00
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)	\$1,470.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$0.00
13	Total Contributions (Line 11 + line 12)	\$1,470.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$620.61
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)	\$ 620.61
20	Total Spending (Line 18 + line 19)	\$ 620.61

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

1

Full Name of Committee/Person: Jordan For Arvada

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 08/18/2019	4. Name (Last, First): <u>Coleen, Evans</u>
2. <u>Contribution Amt.</u> \$ 25.00	5. Address: <u>6846 Coors Court</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Arvada/CO/80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

1. <u>Date Accepted</u> 09/19/2019	4. Name (Last, First): <u>Lausman, Brenda</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>16872 w 85th PL</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Arvada/CO/80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

1. <u>Date Accepted</u> 09/20/2019	4. Name (Last, First): <u>Doll, Christopher</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>7734 Parfet St</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Arvada/CO/80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Banner Health</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Physician</u>

1. <u>Date Accepted</u> 09/20/2019	4. Name (Last, First): <u>Vincenti, Joanna</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>5252 Arbutus St.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Arvada/CO/80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Southwest Airlines</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Customer Service Agent</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: Jordan For Arvada

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 09/20/2019	4. Name (Last, First): <u>Von Koss, Kursten</u>
2. <u>Contribution Amt.</u> \$ 25.00	5. Address: <u>17205 W. 94th Ave.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Arvada/CO/80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Centura Health at Home</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Occupational Therapist</u>

1. <u>Date Accepted</u> 09/21/2019	4. Name (Last, First): <u>Smallwood, Rachael</u>
2. <u>Contribution Amt.</u> \$ 75.00	5. Address: <u>6108 Routt Ct</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Arvada/CO/80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>North Star Rehabilitation and Care Center</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Social Worker</u>

1. <u>Date Accepted</u> 09/21/2019	4. Name (Last, First): <u>Wolford, Rod</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>17794 W 77th Ln</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Arvada/CO/80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Self</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Business Owner</u>

1. <u>Date Accepted</u> 09/24/2019	4. Name (Last, First): <u>Coors, Scott</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>3200 Ohio Way</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>Online contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

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

1

Full Name of Committee/Person: Jordan For Arvada

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 09/25/2019	4. Name (Last, First): <u>Staniszewski, Jeffrey</u>
2. <u>Contribution Amt.</u> \$ 150.00	5. Address: <u>18429 west 84th Place</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Arvada/CO/80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

1. <u>Date Accepted</u> 09/28/2019	4. Name (Last, First): <u>Mohr, Mindy</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>10149 W 55th Drive Unit 106</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Arvada/CO/80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online Contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

1. <u>Date Accepted</u> 09/30/2019	4. Name (Last, First): <u>Griffith, Marla</u>
2. <u>Contribution Amt.</u> \$ 20.00	5. Address: <u>17613 W 84 Dr</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Arvada/CO/80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Siemens</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Consultant/Programmer</u>

1. <u>Date Accepted</u> 10/03/2019	4. Name (Last, First): <u>Stevens, Shirley</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>8640 Calvin Dr</u>
3. <u>Aggregate Amt. *</u> \$ 100.00	6. City/State/Zip: <u>Arvada/CO/80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

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

1

Full Name of Committee/Person: Jordan For Arvada

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/07/2019	4. Name (Last, First): <u>Newton, Brian</u>
2. <u>Contribution Amt.</u> \$ 25.00	5. Address: <u>17008 West 86th Ave</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Arvada/CO/80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Online contribution</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

1. <u>Date Accepted</u> 10/08/2019	4. Name (Last, First): <u>Sweet, Darrell</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>18420 W 84th Place</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Arvada/CO/80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</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>): _____

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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 Arvada

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 09/20/2019	4. Name: <u>Arvada Chamber of Commerce</u>
2. <u>Amount</u> \$ 20.00	5. Address: <u>7305 Grandview Ave</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>Staff Forum Ticket</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 09/24/2019	4. Name: <u>Walmart</u>
2. <u>Amount</u> \$ 43.27	5. Address: <u>7155 Sheridan Boulevard</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Westminster/CO/80003</u>
	7. Purpose of Expenditure: <u>Campaign supplies</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 09/26/2019	4. Name: <u>Signs On The Cheap</u>
2. <u>Amount</u> \$ 360.31	5. Address: <u>11525a Stonehollow Dr</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>Campaign signs</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 09/27/2019	4. Name: <u>Vista Print</u>
2. <u>Amount</u> \$ 34.51	5. Address: <u>275 Wyman Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Waltham/MA/02451</u>
	7. Purpose of Expenditure: <u>Campaign marketing</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 09/30/2019	4. Name: <u>Shell Oil</u>
2. <u>Amount</u> \$ 28.01	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>Arvada/CO/80004</u>
	7. Purpose of Expenditure: <u>Campaign transportation</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

<p>1. <u>Date Expended</u> 10/01/2019</p>	<p>4. Name: <u>Walmart</u></p>
<p>2. <u>Amount</u> \$ 48.63</p>	<p>5. Address: <u>7155 Sheridan Boulevard</u></p>
<p>3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee</p>	<p>6. City/State/Zip: <u>Westminster/CO/80003</u></p>
	<p>7. Purpose of Expenditure: <u>Campaign supplies</u> <input type="checkbox"/> Check box if Electioneering Communication</p>
<p>1. <u>Date Expended</u> 10/02/2019</p>	<p>4. Name: <u>The Home Depot</u></p>
<p>2. <u>Amount</u> \$ 4.29</p>	<p>5. Address: <u>5215 Wadsworth Blvd</u></p>
<p>3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee</p>	<p>6. City/State/Zip: <u>Arvada/CO/80002</u></p>
	<p>7. Purpose of Expenditure: <u>Campaign supplies</u> <input type="checkbox"/> Check box if Electioneering Communication</p>
<p>1. <u>Date Expended</u> 10/02/2019</p>	<p>4. Name: <u>Target</u></p>
<p>2. <u>Amount</u> \$ 27.00</p>	<p>5. Address: <u>1985 Sheridan Boulevard</u></p>
<p>3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee</p>	<p>6. City/State/Zip: <u>Edgewater/CO/80214</u></p>
	<p>7. Purpose of Expenditure: <u>Campaign supplies</u> <input type="checkbox"/> Check box if Electioneering Communication</p>
<p>1. <u>Date Expended</u> 10/02/2019</p>	<p>4. Name: <u>Shell Oil</u></p>
<p>2. <u>Amount</u> \$ 30.00</p>	<p>5. Address: <u>12401 W 64th Ave</u></p>
<p>3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee</p>	<p>6. City/State/Zip: <u>Arvada/CO/80004</u></p>
	<p>7. Purpose of Expenditure: <u>Campaign transportation</u> <input type="checkbox"/> Check box if Electioneering Communication</p>
<p>1. <u>Date Expended</u> 10/07/2019</p>	<p>4. Name: <u>Phillips 66</u></p>
<p>2. <u>Amount</u> \$ 24.59</p>	<p>5. Address: <u>14405 W 64th Ave</u></p>
<p>3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee</p>	<p>6. City/State/Zip: <u>Arvada/CO/80004</u></p>
	<p>7. Purpose of Expenditure: <u>Campaign transportation</u> <input type="checkbox"/> Check box if Electioneering Communication</p>