

Colorado Secretary of State
 Elections Division
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Recvd 10/16/23
 HC

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

Full Name of Committee/Person:	Butler for Ward I
<small>As Shown On Registration</small>	
Address of Committee/Person:	P.O. Box 662
City, State & Zip Code:	Greeley, CO 80632
Committee Type:	Candidate
Name and Address of Financial Institution	1st Bank, P.O. Box 150097, Lakewood, CO 802

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: **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)	\$	\$1,240.50
2	Total Monetary Contributions (line 11)	\$	\$3,530.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$	\$4,770.50
4	Total Monetary Expenditures (line 19)	\$	\$1,333.17
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$	\$3,437.33

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: Barbara M. Niebauer

Registered Agent's Signature: _____ Date: _____

Print Candidate Name: Tommy Butler

Candidates Signature: Date: 10/16/23

DETAILED SUMMARY

Full Name of Committee/Person: Butler for Ward I

Current Reporting Period: 11/5/2022 Through: 10/17/2023

	Funds on hand at the beginning of reporting period (Monetary Only)	\$1,240.50
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$3,530.00
7	Total of Non-Itemized Contributions (Contribution of \$19.99 and Less)	\$0.00
8	Loans Received (Please list on Schedule "C")	\$0.00
9	Total of Other Receipts (Interest, Dividends, etc.)	\$0.00
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$0.00
11	Total Monetary Contributions (Total of lines 6 through 10)	\$3,530.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$0.00
13	Total Contributions (Line 11 + line 12)	\$3,530.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$1,333.17
15	Total of non-Itemized Expenditures (Expenditures of \$19.99 or less)	\$0.00
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)	\$0.00
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$1,333.17
20	Total Spending (Line 18 + line 19)	\$1,333.17

Schedule A - Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Butler for Ward I

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

<u>1. Date Accepted</u> 2/10/2023	4. Name (Last, First): Waak Patricia
<u>2. Contribution Amount</u> \$50.00	5. Address: 4225 County Road 1 1/2
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Erie CO 80516
Check box if Electioneering Communication	7. Description: Electronic Pay System
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): Retired
<u>1. Date Accepted</u> 2/10/2023	4. Name (Last, First): Thompson Jane
<u>2. Contribution Amount</u> \$20.00	5. Address: 1616 12th Ave
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 80631
Check box if Electioneering Communication	7. Description: Electronic Pay System
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):
<u>1. Date Accepted</u> 2/10/2023	4. Name (Last, First): Nelson Patricia
<u>2. Contribution Amount</u> \$10.00	5. Address: 1906 11th Ave, Apt 202
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 80631
Check box if Electioneering Communication	7. Description: Electronic Pay System
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):
<u>1. Date Accepted</u> 2/11/2023	4. Name (Last, First): Bruner Patricia
<u>2. Contribution Amount</u> \$10.00	5. Address: 1607 12th Ave
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 80631
Check box if Electioneering Communication	7. Description: Electronic Pay System
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): Retired

Schedule A - Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Butler for Ward I

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

<u>1. Date Accepted</u> 2/11/2023	4. Name (Last, First): <u>Shepherd</u> <u>Jeri</u>
<u>2. Contribution Amount</u> \$50.00	5. Address: <u>1713 Fairacre Rd</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>Jeri D. Shepherd, Attorney at Law</u>
	9. Occupation (if applicable, mandatory): <u>Attorney/Legal</u>
<u>1. Date Accepted</u> 2/13/2023	4. Name (Last, First): <u>Brown</u> <u>Cheri</u>
<u>2. Contribution Amount</u> \$100.00	5. Address: <u>107 51st Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>Greeley-Weld Habitat for Humanity</u>
	9. Occupation (if applicable, mandatory): <u>Construction/Engineering</u>
<u>1. Date Accepted</u> 2/16/2023	4. Name (Last, First): <u>Goble</u> <u>Kirk</u>
<u>2. Contribution Amount</u> \$50.00	5. Address: <u>1924 13th Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>
<u>1. Date Accepted</u> 3/1/2023	4. Name (Last, First): <u>Massaro</u> <u>Carla</u>
<u>2. Contribution Amount</u> \$20.00	5. Address: <u>4250 TARRYALL COURT</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Loveland</u> <u>CO</u> <u>80538</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

Schedule A - Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Butler for Ward I

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

<u>1. Date Accepted</u> 3/2/2023	4. Name (Last, First): <u>DeBoutez</u> <u>Deborah</u>
<u>2. Contribution Amount</u> \$100.00	5. Address: <u>1863 13th Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): <u>City of Greeley</u>
	9. Occupation (if applicable, mandatory): <u>Government/Civil Service</u>
<u>1. Date Accepted</u> 3/4/2023	4. Name (Last, First): <u>Jeffery</u> <u>Jamie</u>
<u>2. Contribution Amount</u> \$20.00	5. Address: <u>338 Valley Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Lochbuie</u> <u>CO</u> <u>80603</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>State of Colorado</u>
	9. Occupation (if applicable, mandatory): <u>Teacher/Education</u>
<u>1. Date Accepted</u> 3/4/2023	4. Name (Last, First): <u>Rutinel</u> <u>Manny</u>
<u>2. Contribution Amount</u> \$50.00	5. Address: <u>9627 E 105th Place, APT 207</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Commerce City</u> <u>CO</u> <u>80640</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>Earthjustice</u>
	9. Occupation (if applicable, mandatory): <u>Attorney/Legal</u>
<u>1. Date Accepted</u> 3/5/2023	4. Name (Last, First): <u>Schuttler</u> <u>John</u>
<u>2. Contribution Amount</u> \$50.00	5. Address: <u>2306 45th Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

Schedule A - Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Butler for Ward I

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

<u>1. Date Accepted</u> 3/6/2023	4. Name (Last, First): Pappas Terri
<u>2. Contribution Amount</u> \$100.00	5. Address: 1925 15th Ave
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 80631
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Check
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): Retired
<u>1. Date Accepted</u> 3/11/2023	4. Name (Last, First): Bruner Patricia
<u>2. Contribution Amount</u> \$10.00	5. Address: 1607 12th Avenue
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 80631
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Electronic Pay System
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): Retired
<u>1. Date Accepted</u> 4/1/2023	4. Name (Last, First): Rodriguez Ben
<u>2. Contribution Amount</u> \$50.00	5. Address: 3063 Brighton Blvd #829
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Denver CO 80216
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Electronic Pay System
	8. Employer (if applicable, mandatory): Finance
	9. Occupation (if applicable, mandatory): CFC
<u>1. Date Accepted</u> 4/3/2023	4. Name (Last, First): Pinter Emma
<u>2. Contribution Amount</u> \$25.00	5. Address: 10755 TENNYSON WAY
<u>3. Aggregate Amt.</u>	6. City/State/Zip: WESTMINSTER CO 80031
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Electronic Pay System
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

Schedule A - Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Butler for Ward I

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

<u>1. Date Accepted</u> 4/3/2023	4. Name (Last, First): Waak Patricia
<u>2. Contribution Amount</u> \$50.00	5. Address: 4225 County Road 1 1/2
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Erie CO 80516
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Electronic Pay System
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): Retired
<u>1. Date Accepted</u> 4/11/2023	4. Name (Last, First): Bruner Patricia
<u>2. Contribution Amount</u> \$10.00	5. Address: 1607 12th Ave
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 80631
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Electronic Pay System
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): Retired
<u>1. Date Accepted</u> 4/14/2023	4. Name (Last, First): Cambell Carol
<u>2. Contribution Amount</u> \$100.00	5. Address: 3581 W 11th Dr. Unit B
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Westminster CO 80031
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Electronic Pay System
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): Retired
<u>1. Date Accepted</u> 4/14/2023	4. Name (Last, First): Burkhart Carol
<u>2. Contribution Amount</u> \$100.00	5. Address: 2733 W 19th St
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 80634
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Check
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): Retired

<p>Schedule A - Itemized Contributions Statement (\$20 or more) [C.R.S. 1-45-108(1)(a)]</p>
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Full Name of Committee/Person: Butler for Ward I

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<p><u>1. Date Accepted</u> 4/16/2023</p>	<p>4. Name (Last, First): Curry Anne</p>
<p><u>2. Contribution Amount</u> \$50.00</p>	<p>5. Address: 1527 44th Ave Ct</p>
<p><u>3. Aggregate Amt.</u></p>	<p>6. City/State/Zip: Greeley CO 80634</p>
<p><input type="checkbox"/> Check box if Electioneering Communication</p>	<p>7. Description: Check</p> <p>8. Employer (if applicable, mandatory):</p> <p>9. Occupation (if applicable, mandatory):</p>
<p><u>1. Date Accepted</u> 4/16/2023</p>	<p>4. Name (Last, First): Kevin's Political Action C</p>
<p><u>2. Contribution Amount</u> \$50.00</p>	<p>5. Address: 12255 Ursula St</p>
<p><u>3. Aggregate Amt.</u></p>	<p>6. City/State/Zip: Henderson CO 80640</p>
<p><input type="checkbox"/> Check box if Electioneering Communication</p>	<p>7. Description: Check</p> <p>8. Employer (if applicable, mandatory):</p> <p>9. Occupation (if applicable, mandatory):</p>
<p><u>1. Date Accepted</u> 4/18/2023</p>	<p>4. Name (Last, First): Shaddock Pamela</p>
<p><u>2. Contribution Amount</u> \$50.00</p>	<p>5. Address: 516 N Brisbane Ave</p>
<p><u>3. Aggregate Amt.</u></p>	<p>6. City/State/Zip: Greeley CO 80634</p>
<p><input type="checkbox"/> Check box if Electioneering Communication</p>	<p>7. Description: Check</p> <p>8. Employer (if applicable, mandatory):</p> <p>9. Occupation (if applicable, mandatory):</p>
<p><u>1. Date Accepted</u> 4/20/2023</p>	<p>4. Name (Last, First): Johnson Jack</p>
<p><u>2. Contribution Amount</u> \$50.00</p>	<p>5. Address: 2422 W 82nd Pl Unit 3A</p>
<p><u>3. Aggregate Amt.</u></p>	<p>6. City/State/Zip: Westminster CO 80031</p>
<p><input type="checkbox"/> Check box if Electioneering Communication</p>	<p>7. Description: Check</p> <p>8. Employer (if applicable, mandatory):</p> <p>9. Occupation (if applicable, mandatory):</p>

Schedule A - Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Butler for Ward I

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

<u>1. Date Accepted</u> 4/26/2023	4. Name (Last, First): <u>Stockton Lynn</u>
<u>2. Contribution Amount</u> \$50.00	5. Address: <u>1721 Suntide Dr</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Johnstown CO 80534</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>
<u>1. Date Accepted</u> 5/8/2023	4. Name (Last, First): <u>Barzdukas Robert</u>
<u>2. Contribution Amount</u> \$50.00	5. Address: <u>5609 W 16th St Ln</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>
<u>1. Date Accepted</u> 5/11/2023	4. Name (Last, First): <u>Bruner Patricia</u>
<u>2. Contribution Amount</u> \$10.00	5. Address: <u>1607 12th Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley CO 80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____
<u>1. Date Accepted</u> 5/15/2023	4. Name (Last, First): <u>Campos-Spitze Brenda</u>
<u>2. Contribution Amount</u> \$200.00	5. Address: <u>1714 22nd Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley CO 80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>Sunrise Community Health</u>
	9. Occupation (if applicable, mandatory): <u>Health Care/Medical</u>

Schedule A - Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Butler for Ward I

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

<u>1. Date Accepted</u> 5/16/2023	4. Name (Last, First): <u>Richard</u> <u>Julia</u>
<u>2. Contribution Amount</u> \$100.00	5. Address: <u>1313 9th Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): <u>Self</u>
	9. Occupation (if applicable, mandatory): <u>Real Estate Professional</u>
<u>1. Date Accepted</u> 6/11/2023	4. Name (Last, First): <u>Bruner</u> <u>Patricia</u>
<u>2. Contribution Amount</u> \$10.00	5. Address: <u>1607 12th Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>
<u>1. Date Accepted</u> 6/22/2023	4. Name (Last, First): <u>Dugan</u> <u>Amy</u>
<u>2. Contribution Amount</u> \$50.00	5. Address: <u>3205 69th Ave Pl</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____
<u>1. Date Accepted</u> 6/30/2023	4. Name (Last, First): <u>Rodriguez</u> <u>Ben</u>
<u>2. Contribution Amount</u> \$50.00	5. Address: <u>3063 Brighton Blvd #829</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Denver</u> <u>CO</u> <u>80216</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>Finance</u>
	9. Occupation (if applicable, mandatory): <u>CFC</u>

Schedule A - Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Butler for Ward I

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

<u>1. Date Accepted</u> 7/5/2023	4. Name (Last, First): <u>Curry</u> <u>Anne</u>
<u>2. Contribution Amount</u> \$100.00	5. Address: <u>1527 44th Ave Court</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>
<u>1. Date Accepted</u> 7/11/2023	4. Name (Last, First): <u>Bruner</u> <u>Patricia</u>
<u>2. Contribution Amount</u> \$10.00	5. Address: <u>1607 12th Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>
<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): <u>Bookman</u> <u>John</u>
<u>2. Contribution Amount</u> \$25.00	5. Address: <u>1854 13th Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____
<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): <u>Troxell</u> <u>Duangchan</u>
<u>2. Contribution Amount</u> \$100.00	5. Address: <u>1869 13th Avenue</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): <u>Not Currently Employed</u>

Schedule A - Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Butler for Ward I

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

<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): <u>Henderon Susan</u>
<u>2. Contribution Amount</u> \$100.00	5. Address: <u>1425 Glenmere Blvd</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley CO 80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>City of Greeley</u>
	9. Occupation (if applicable, mandatory): <u>Attorney/Legal</u>
<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): <u>Pythian Casey</u>
<u>2. Contribution Amount</u> \$50.00	5. Address: <u>202 11th Street</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley CO 80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>JBS</u>
	9. Occupation (if applicable, mandatory): <u>Agriculture</u>
<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): <u>Redmon James</u>
<u>2. Contribution Amount</u> \$50.00	5. Address: <u>1703 13th Ave. Apt. A</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley CO 80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): <u>City of Fort Collins</u>
	9. Occupation (if applicable, mandatory): <u>Government/Civil Service</u>
<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): <u>Norem Ken</u>
<u>2. Contribution Amount</u> \$50.00	5. Address: <u>1508 Lakeside Drive</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley CO 80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Cash</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

Schedule A - Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Butler for Ward I

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

<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): Borg Mary
<u>2. Contribution Amount</u> \$20.00	5. Address: 1854 13th Ave
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 80631
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Cash
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): Retired
<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): Kohles Lindsay
<u>2. Contribution Amount</u> \$100.00	5. Address: 1862 13th Ave
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 80631
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Cash
	8. Employer (if applicable, mandatory): UNC
	9. Occupation (if applicable, mandatory): Teacher/Education
<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): Bator George
<u>2. Contribution Amount</u> \$50.00	5. Address: 1920 12th Ave
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 80631
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Check
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): Retired
<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): Bator Tannis
<u>2. Contribution Amount</u> \$100.00	5. Address: 1920 12th Ave
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 8061
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Check
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): Retired

Schedule A - Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Butler for Ward I

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

<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): <u>Thompson</u> <u>Linde</u>
<u>2. Contribution Amount</u> \$50.00	5. Address: <u>1616 12th Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____
<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): <u>Milian</u> <u>Madeline</u>
<u>2. Contribution Amount</u> \$100.00	5. Address: <u>1815 13th Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): <u>UNC</u>
	9. Occupation (if applicable, mandatory): <u>Teacher/Education</u>
<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): <u>Bricker</u> <u>Pamela</u>
<u>2. Contribution Amount</u> \$100.00	5. Address: <u>2234 21st Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>
<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): <u>Wasson</u> <u>Patricia</u>
<u>2. Contribution Amount</u> \$100.00	5. Address: <u>1225 8th St</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

Schedule A - Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Butler for Ward I

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

<u>1. Date Accepted</u> 7/27/2023	4. Name (Last, First): Kohles James
<u>2. Contribution Amount</u> \$100.00	5. Address: 1862 13th Ave
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 80631
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Cash
	8. Employer (if applicable, mandatory): UNC
	9. Occupation (if applicable, mandatory): Teacher/Education
<u>1. Date Accepted</u> 7/31/2023	4. Name (Last, First): Plomer Kathy
<u>2. Contribution Amount</u> \$30.00	5. Address: 5128 Bottlebrush Run
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Broomfield CO 80023
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Electronic Pay System
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory): Not Currently Employed
<u>1. Date Accepted</u> 8/13/2023	4. Name (Last, First): Califana Patricia
<u>2. Contribution Amount</u> \$50.00	5. Address: 1907 14th Ave
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 80631
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Check
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): Retired
<u>1. Date Accepted</u> 8/13/2023	4. Name (Last, First): Perl Donald
<u>2. Contribution Amount</u> \$50.00	5. Address: 2424 22nd Ave
<u>3. Aggregate Amt.</u>	6. City/State/Zip: Greeley CO 80631
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Check
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): Retired

Schedule A - Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Butler for Ward I

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

<u>1. Date Accepted</u> 9/29/2023	4. Name (Last, First): <u>Greeley Firefighters, Loc</u>
<u>2. Contribution Amount</u> \$500.00	5. Address: <u>804 23rd Ave</u>
<u>3. Aggregate Amt.</u>	6. City/State/Zip: <u>Greeley</u> <u>CO</u> <u>80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Electronic Pay System</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

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

Full Name of Committee/Person: Butler for Ward I

PLEASE PRINT/TYPE

1. Date Expended <u>2/24/2023</u>	4. Name: <u>The Copy Shoppe</u>
2. Amount <u>30.89</u>	5. Address: <u>3011 W 10th St #107</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Greeley CO 80634</u>
	7. Purpose of Expenditure: <u>Envelopes</u>
	<input type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>2/28/2023</u>	4. Name: <u>ActBlue, LLC</u>
2. Amount <u>12.34</u>	5. Address: <u>366 Summer Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Somerville MA 02144</u>
	7. Purpose of Expenditure: <u>February ActBlue Fees</u>
	<input type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>3/31/2023</u>	4. Name: <u>ActBlue, LLC</u>
2. Amount <u>4.62</u>	5. Address: <u>366 Summer Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Somerville MA 02144</u>
	7. Purpose of Expenditure: <u>March ActBlue Fees</u>
	<input type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>4/14/2023</u>	4. Name: <u>Square</u>
2. Amount <u>3.65</u>	5. Address: <u>1455 Market St</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>San Francisco CA 94103</u>
	7. Purpose of Expenditure: <u>Square Credit Card Fee</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: Butler for Ward I

PLEASE PRINT/TYPE

1. Date Expended <u>4/30/2023</u>	4. Name: <u>ActBlue, LLC</u>
2. Amount <u>2.68</u>	5. Address: <u>366 Summer Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Somerville MA 02144</u>
	7. Purpose of Expenditure: <u>April ActBlue Fees</u>
	<input type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>5/31/2023</u>	4. Name: <u>ActBlue, LLC</u>
2. Amount <u>8.23</u>	5. Address: <u>366 Summer Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Somerville MA 02144</u>
	7. Purpose of Expenditure: <u>May ActBlue Fees</u>
	<input type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>6/6/2023</u>	4. Name: <u>GoDaddy</u>
2. Amount <u>12.17</u>	5. Address: <u>14455 North Hayden Road, Suite 219</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Scottsdale AZ 85260</u>
	7. Purpose of Expenditure: <u>Website Domain Purchase</u>
	<input type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>6/15/2023</u>	4. Name: <u>Colorado Democratic Party</u>
2. Amount <u>125</u>	5. Address: <u>789 Sherman St, Suite 110</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver CO 80203</u>
	7. Purpose of Expenditure: <u>VAN Access</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: Butler for Ward I

PLEASE PRINT/TYPE

1. Date Expended <u>6/20/2023</u>	4. Name: <u>SignsOnTheCheap.com</u>
2. Amount <u>461.82</u>	5. Address: <u>11525A Stonehollow Dr., Suite 100</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 type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>6/23/2023</u>	4. Name: <u>Elevations Pictures</u>
2. Amount <u>150</u>	5. Address: <u>202 11th St</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Greeley CO 80631</u>
	7. Purpose of Expenditure: <u>Campaign Photos</u>
	<input type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>6/27/2023</u>	4. Name: <u>Amazon</u>
2. Amount <u>124.35</u>	5. Address: <u>P.O. Box 81226</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Seattle WA 98108</u>
	7. Purpose of Expenditure: <u>Yard Sign Stakes</u>
	<input type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>6/30/2023</u>	4. Name: <u>ActBlue, LLC</u>
2. Amount <u>0.6</u>	5. Address: <u>366 Summer Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Somerville MA 02144</u>
	7. Purpose of Expenditure: <u>June ActBlue Fees</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: Butler for Ward I

PLEASE PRINT/TYPE

1. Date Expended <u>7/3/2023</u>	4. Name: <u>SquaresSpace Inc</u>
2. Amount <u>33</u>	5. Address: <u>225 Varick Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>New York NY 10014</u>
	7. Purpose of Expenditure: <u>Website Monthly Fee</u> <input type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>7/20/2023</u>	4. Name: <u>Vistaprint</u>
2. Amount <u>230.05</u>	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 Lit</u> <input type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>7/31/2023</u>	4. Name: <u>ActBlue, LLC</u>
2. Amount <u>16.04</u>	5. Address: <u>366 Summer Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Somerville MA 02144</u>
	7. Purpose of Expenditure: <u>July ActBlue Fees</u> <input type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>8/3/2023</u>	4. Name: <u>SquaresSpace Inc</u>
2. Amount <u>33</u>	5. Address: <u>225 Varick Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>New York NY 10014</u>
	7. Purpose of Expenditure: <u>Website Monthly Fee</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: Butler for Ward I

PLEASE PRINT/TYPE

1. Date Expended <u>9/5/2023</u>	4. Name: <u>SquaresSpace Inc</u>
2. Amount <u>33</u>	5. Address: <u>225 Varick Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>New York NY 10014</u>
	7. Purpose of Expenditure: <u>Website Monthly Fee</u>
	<input type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>9/29/2023</u>	4. Name: <u>ActBlue, LLC</u>
2. Amount <u>18.73</u>	5. Address: <u>366 Summer Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Somerville MA 02144</u>
	7. Purpose of Expenditure: <u>September ActBlue Fees</u>
	<input type="checkbox"/> Check Box if Electioneering Communication

1. Date Expended <u>10/3/2023</u>	4. Name: <u>SquaresSpace Inc</u>
2. Amount <u>33</u>	5. Address: <u>225 Varick Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>New York NY 10014</u>
	7. Purpose of Expenditure: <u>Website Monthly Fee</u>
	<input type="checkbox"/> Check Box if Electioneering Communication

Schedule C - Loans

Full Name of Committee/Person: Butler for Ward I

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(c)] 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): _____