

Colorado Secretary of State
Elections Division
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CLERK'S OFFICE REC
OCT 19 23 PM 2:05

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

Full Name of Committee/Person:	COMMITTEE TO ELECT JOHN GATES
As Shown On Registration	
Address of Committee/Person:	1357 F3 AVENUE, UNIT 62
City, State & Zip Code:	CREELEY, CO 80634
Committee Type:	MUNICIPAL
Name and Address of Financial Institution	FMS BANK, 2425 35 AVE., CREELEY, CO

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)	\$ 3,909.05
2	Total Monetary Contributions (line 11)	\$ 9,550.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 13,459.05
4	Total Monetary Expenditures (line 19)	\$ 4,016.22
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 9,442.83

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: JOHN D. GATES

Candidates Signature: [Signature] Date: 10-13-23

DETAILED SUMMARY

Full Name of Committee/Person:

COMMITTEE TO ELECT JOHN GAJES

Current Reporting Period:

10-27-2022

Through

10-17-2023

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	3,909.05
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	9,550.00
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)	\$	9,550.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	-0-
13	Total Contributions (Line 11 + line 12)	\$	9,550.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	4,016.22
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)	\$	4,016.22
20	Total Spending (Line 18 + line 19)	\$	4,016.22

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

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

Full Name of Committee/Person: COMMITTEE TO ELECT JOHN GATES

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 3-16-23	4. Name (Last, First): <u>JOHN/DELIA HAEFELI</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>1996 43 AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> 3-16-23	4. Name (Last, First): <u>NINA/JOHN GUTIERREZ</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>617 63 AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>OWNER</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>CAN. DO CONCRETE</u>

1. <u>Date Accepted</u> 3-17-23	4. Name (Last, First): <u>MIKE/LORI SHOOP</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>6600 W. 20 ST, # 47</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> 3-17-23	4. Name (Last, First): <u>MIKE/JILL TROTTER</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>1757 40 AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>OWNER</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>FRONT RANGE BOOKING</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: COMMITTEE TO ELECT JOHN GATES

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 3-17-23	4. Name (Last, First): <u>STEVE BAKER</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>3736 W. 16 ST LN</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>REALTOR</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>SEARS REAL ESTATE</u>

1. <u>Date Accepted</u> 3-17-23	4. Name (Last, First): <u>PHYLLIS/LARRY EATON</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>1904 26 AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> 3-18-23	4. Name (Last, First): <u>CHUCK DICKSON</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>4505 W. 14 STREET</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> 3-18-23	4. Name (Last, First): <u>JOEL JOYCE ROTHMAN</u>
2. <u>Contribution Amt.</u> \$ 100.01	5. Address: <u>5505 W. 24 STREET</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>): <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: COMMITTEE TO ELECT JOHN GATES

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 3-18-23	4. Name (Last, First): <u>DICK MONFORT</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>1901 WAZEE, # 1402</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>DENVER, CO 80202</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>COLORADO ROCKIES</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>OWNER</u>

1. <u>Date Accepted</u> 3-19-23	4. Name (Last, First): <u>MIKE/VIRGINIA SLAUGHTER</u>
2. <u>Contribution Amt.</u> \$ 100.01	5. Address: <u>1674 37 AVE PLACE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>SLAUGHTER ROOFING</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>OWNER</u>

1. <u>Date Accepted</u> 3-20-23	4. Name (Last, First): <u>JIM/BONNIE NOFFSINGER</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>2120 45 AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> 3-20-23	4. Name (Last, First): <u>EDITH NOTTINGHAM</u>
2. <u>Contribution Amt.</u> \$ 200.00	5. Address: <u>1357 43 AVE, UNIT 6</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>): <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: COMMITTEE TO ELECT JOHN GATES

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>3-20-23</u>	4. Name (Last, First): <u>LEVI / COLLEEN YODER</u>
2. <u>Contribution Amt.</u> \$ <u>250.00</u>	5. Address: <u>217 N. 52 AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> <u>3-20-23</u>	4. Name (Last, First): <u>BRUCE BRODERIUS</u>
2. <u>Contribution Amt.</u> \$ <u>150.00</u>	5. Address: <u>5601 W. 18 STREET, #57</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> <u>3-21-23</u>	4. Name (Last, First): <u>GEORGE / BETTY HALL</u>
2. <u>Contribution Amt.</u> \$ <u>100.00</u>	5. Address: <u>4274 W. 14 ST RD</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>HALL-IRWIN</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>OWNER</u>

1. <u>Date Accepted</u> <u>3-21-23</u>	4. Name (Last, First): <u>HAROLD / CAROL EVANS</u>
2. <u>Contribution Amt.</u> \$ <u>1,000.00</u>	5. Address: <u>1821 FRONTIER ROAD</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>EVANS GROUP</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>OWNER</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: COMMITTEE TO ELECT JOHN GATES

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 3-21-23	4. Name (Last, First): <u>PHYLLIS DAVIS</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>4555 N. 18 STREET</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> 3-21-23	4. Name (Last, First): <u>ROBERT RUYLE</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>2101 24 STREET</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> 3-22-23	4. Name (Last, First): <u>RENE WATERS</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>1357 43 AVE., UNIT 19</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>SIGNATURE STONE</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>OWNER</u>

1. <u>Date Accepted</u> 3-22-23	4. Name (Last, First): <u>FRED OTIS</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>6901 W. C STREET</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>OTIS AND BEDINGFIELD ATTORNEYS</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>OWNER</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: COMMITTEE TO ELECT JOHN GATES

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 3-24-23	4. Name (Last, First): <u>ODIE/MARY ROBERTS</u>
2. <u>Contribution Amt.</u> \$ 200.00	5. Address: <u>2909 45 AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>LINCOLN PARK EMPORIUM</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>OWNERS</u>

1. <u>Date Accepted</u> 3-24-23	4. Name (Last, First): <u>BRIAN/JENNIFER BARTZS</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>3946 N. 16 ST LANE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>WALTER COMPANIES</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>OWNER</u>

1. <u>Date Accepted</u> 3-24-23	4. Name (Last, First): <u>BRIAN/KIM LARSON</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>6600 W. 20 ST, # 39</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>EDWARD JONES</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>FINANCIAL ADVISORS</u>

1. <u>Date Accepted</u> 3-27-23	4. Name (Last, First): <u>DAVID CLARKSON</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>1918 26 AVE CT</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>): <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: COMMITTEE TO ELECT JOHN GATES

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>3-28-23</u>	4. Name (Last, First): <u>BILL/DEBBY EASTWOOD</u>
2. <u>Contribution Amt.</u> \$ <u>200.00</u>	5. Address: <u>4515 W. 14 STREET</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> <u>3-28-23</u>	4. Name (Last, First): <u>SCOTT/KOLLY SHRLICH</u>
2. <u>Contribution Amt.</u> \$ <u>100.00</u>	5. Address: <u>1414 42 AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> <u>3-30-23</u>	4. Name (Last, First): <u>BOB/DIANE MILLEN</u>
2. <u>Contribution Amt.</u> \$ <u>100.00</u>	5. Address: <u>3542 W. WAGON TRAIL RD.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> <u>4-4-23</u>	4. Name (Last, First): <u>ROBERT TONTON</u>
2. <u>Contribution Amt.</u> \$ <u>250.00</u>	5. Address: <u>6305 26 STREET</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>): <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: COMMITTEE TO ELECT JOHN GATES

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PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 4-4-23	4. Name (Last, First): <u>JOHN / SUSAN TBOO</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>1756 37 AVE. PLACE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> 4-4-23	4. Name (Last, First): <u>TRAVIS / JENNIFER GILLMORE</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>2665 54 AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>PHELPS-TONINON INC.</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>EXECUTIVE</u>

1. <u>Date Accepted</u> 4-7-23	4. Name (Last, First): <u>STEVE / JOYCE MORENO</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>136 N. 50 AVE PLACE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>RETIRED</u>
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 4-12-23	4. Name (Last, First): <u>CHUCK / PAM COOPER</u>
2. <u>Contribution Amt.</u> \$ 200.00	5. Address: <u>2903 70 AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>SELF-EMPLOYED</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>FINANCIAL ADVISOR</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: COMMITTEE TO ELECT JOHN GATES

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 4-12-23	4. Name (Last, First): <u>ROGER KNOPH</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>5445 W. 7 ST RD</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, mandatory): <u>ENVIRO TECH</u>
	9. Occupation (if applicable, mandatory): <u>OWNER</u>

1. <u>Date Accepted</u> 5-2-23	4. Name (Last, First): <u>KEN/ELIZABETH OLDS</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>1212 50 AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): <u>RETIRED</u>

1. <u>Date Accepted</u> 6-13-23	4. Name (Last, First): <u>BOB/ANN GHENT</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>3520 HOLMAN COURT</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, mandatory): <u>GHENT MOTORS</u>
	9. Occupation (if applicable, mandatory): <u>OWNER</u>

1. <u>Date Accepted</u> 7-29-23	4. Name (Last, First): <u>CARL/JOANN HILL</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>4529 W. 14 STREET</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	8. Employer (if applicable, mandatory): _____
	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: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10-9-23	4. Name (Last, First): <u>GREELEY AREA REACTOR ASSOCIATION</u>
2. <u>Contribution Amt.</u> \$ 1000.00	5. Address: <u>1620 25 AVENUE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GREELEY, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION</u>
	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>): _____

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 JOHN GATES

PLEASE PRINT/TYPE

1. Date Expended <u>12-23-22</u>	4. Name: <u>GUARDIAN STORAGE</u>
2. Amount \$ <u>1,896.00</u>	5. Address: <u>2600 36 AVENUE</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>SIGN STORAGE</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>2-17-23</u>	4. Name: <u>PIONEER PRESS</u>
2. Amount \$ <u>185.00</u>	5. Address: <u>2965 27 AVENUE</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>PRINTING</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>3-8-23</u>	4. Name: <u>FED-EX OFFICE</u>
2. Amount \$ <u>171.22</u>	5. Address: <u>3607 N. 10 STREET</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>PRINTING</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>3-20-23</u>	4. Name: <u>GREELEY CHAMBER OF COMMERCE</u>
2. Amount \$ <u>100.00</u>	5. Address: <u>902 7 AVENUE</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>MEMBERSHIP DUES</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>4-21-23</u>	4. Name: <u>WELD WOMEN 2 WOMEN</u>
2. Amount \$ <u>440.00</u>	5. Address: <u>PO BOX 336962</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>GREELEY, CO 80633</u>
	7. Purpose of Expenditure: <u>EVENT SPONSORSHIP</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: COMMITTEE TO ELECT JOHN GATES

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>6-27-23</u>	4. Name: <u>GREELEY CHAMBER OF COMMERCE</u>
2. <u>Amount</u> \$ <u>500.00</u>	5. Address: <u>902 7 AVENUE</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>PRAIRIE DOG TOURNAMENT SPONSORSHIP</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>8-14-23</u>	4. Name: <u>ACE HARDWARE</u>
2. <u>Amount</u> \$ <u>155.19</u>	5. Address: <u>3540 W. 10 STREET</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>SAND BAITS</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>8-14-23</u>	4. Name: <u>ACE HARDWARE</u>
2. <u>Amount</u> \$ <u>192.40</u>	5. Address: <u>3540 W. 10 STREET</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>SAND BAITS</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10-3-23</u>	4. Name: <u>PIONEER PRESS</u>
2. <u>Amount</u> \$ <u>128.41</u>	5. Address: <u>2965 27 AVENUE</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>PRINTING</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10-4-23</u>	4. Name: <u>UNITED STATES POSTAL SERVICE</u>
2. <u>Amount</u> \$ <u>198.00</u>	5. Address: <u>930 39 AVENUE</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>STAMPS</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: COMMITTEE TO ELECT JOHN GATES

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>(AS LISTED)</u>	4. Name: <u>FMS BANK</u>
2. <u>Amount</u> \$ <u>50.00</u>	5. Address: <u>2425 35 AVENUE</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>BANK FEE @ \$5.00 (12-30/2-2/3-2/3-31/5-2/6-2/6-30/8-2/9-1/10-2)</u> <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	

Colorado Secretary of State
Elections Division
1700 Broadway, Suite 200
Denver, CO 80290
Ph: (303) 894-2200
Fax: (303) 869-4861
Email: cpfhelp@sos.state.co.us
Website: www.sos.state.co.us



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NOTICE OF MAJOR CONTRIBUTOR

[1-45-108(2.5)]

This report is mandatory for all committees and political parties for contributions of \$1000 or more (monetary or non-monetary) received within 30 days immediately preceding a primary or general election.
This report shall be filed with the Secretary of State within 24 hours after receipt of the contribution.
Loans to committees are considered contributions

Name of Committee Receiving Contribution:

Committee to Elect John Gates

Address of Committee Receiving Contribution:

1357 43 Avenue, Unit 62 Greeley, CO 80634

Full Name of Contributor:

Greeley Area Realtor Association

Full Address of Contributor:

1620 25 Avenue Greeley, CO 80634

Monetary

Non-Monetary (item/s)

Contribution Date: 10-9-23

Amount of Contribution: \$ 1,000.00

Description of Non-Monetary Contribution:

Campaign Donation (Check)

Print Registered Agent's Name: _____

Registered Agent's Signature: _____ Date: _____

Print Candidate's Name: John D. Gates

Candidate's Signature:  Date: 10-9-23

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