

Pitkin County Clerk and Recorder
 530 E Main St., STE 104
 Aspen, Colorado 81611
 Phone: (970) 429-2732
 Fax: (970) 445-3007
 eFile address: elections@pitkincounty.com
 Website: www.pitkinvotes.com



space below for office use only

RECEIVED
 OCT 15 2024
 PITKIN COUNTY CLERK

CLERK AND RECORDER

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Candidate:	Our Airport Our Vote
<small>As Shown On Pitkin County Committee Registration</small>	
Address of Committee/Candidate:	35 Lower Woodbridge Rd A102
City, State & Zip Code:	Snowmass Village CO 81615
Committee Type:	Issue Committee
Name and Address of Financial Institution	1st Bank PO Box 150897 Lakewood CO 80215

Type of Report

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

Reporting Period Covered: Through
Date Date

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

	Totals Detailed Summary Page
1 Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 0.00
2 Total Monetary Contributions (line 11)	\$ 121,433.00
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 121,433.00
4 Total Monetary Expenditures (line 19)	\$ 117,424.21
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 4,008.79

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: Ashley Stevens
 Registered Agent's Signature: Date: 10/15/2024
 Print Candidate Name: n/a
 Candidate's Signature: Date:

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

I.C.R.S. 81-45-108(1)(a); HRC § 6.6.41

Full Name of Committee/Person: Our Airport Our Vote - OAOV

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

PLEASE PRINT/TYPE

1. Date Accepted <u>7/22/24</u>	4. Name (Last, First): <u>Citizens Against Bigger Planes</u>
2. Contribution Amt. \$ <u>30,000</u>	5. Address: <u>PO Box 5592</u>
3. Aggregate Amt. * \$ <u>30,000</u>	6. City/State/Zip: <u>Snowmass Village, CO 81616</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>8/8/24</u>	4. Name (Last, First): <u>Torre</u>
2. Contribution Amt. \$ <u>99.00</u>	5. Address: <u>427 Rio Grande Place</u>
3. Aggregate Amt. * \$ <u>99.00</u>	6. City/State/Zip: <u>Aspen, CO 81611</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>City of Aspen</u>
	9. Occupation (if applicable, mandatory): <u>Mayor</u>

1. Date Accepted <u>8/15/24</u>	4. Name (Last, First): <u>Timothy Mooney</u>
2. Contribution Amt. \$ <u>99.00</u>	5. Address: <u>308 Park Ave</u>
3. Aggregate Amt. * \$ <u>99.00</u>	6. City/State/Zip: <u>Aspen, CO 81611</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>Silver Smith Frampton</u>
	9. Occupation (if applicable, mandatory): <u>Broker</u>

1. Date Accepted <u>8/28/24</u>	4. Name (Last, First): <u>Citizens Against Bigger Planes</u>
2. Contribution Amt. \$ <u>20,000</u>	5. Address: <u>PO Box 5592</u>
3. Aggregate Amt. * \$ <u>50,000</u>	6. City/State/Zip: <u>Snowmass Village CO 81616</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following legal authorities: Political Party – Colo. Const. art. XXVIII, Sec. 3(3); Small Donor Committee – Colo. Const. art. XXVIII, Sec. 2(14); Pitkin County Candidate or Candidate Committee – HRC § 6.6.2; Political Committee Supporting or Opposing Pitkin County Candidate(s) – HRC § 6.6.2.

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

C.R.S. 81-45-108(1)(a); HRC § 6.6.41

Full Name of Committee/Person: DAOV

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 8/28/24	4. Name (Last, First): <u>Clifford Runge</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>1230 mtn view Dr.</u>
3. <u>Aggregate Amt. *</u> \$ 100.00	6. City/State/Zip: <u>Aspen, CO 81611</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	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> 8/30/24	4. Name (Last, First): <u>Robert Pew</u>
2. <u>Contribution Amt.</u> \$ 10,000	5. Address: <u>105 River Rock Ln</u>
3. <u>Aggregate Amt. *</u> \$ 10,000	6. City/State/Zip: <u>Woody Creek, CO 81656</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Steelcase</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>General Buisness</u>

1. <u>Date Accepted</u> 8/30/24	4. Name (Last, First): <u>Chuck Butler</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>35 Lower Woodbridge Rd A102</u>
3. <u>Aggregate Amt. *</u> \$ 100	6. City/State/Zip: <u>Snowmass Village, CO 81616</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Priscilla + Edward</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Partner + Founder</u>

1. <u>Date Accepted</u> 9/4/24	4. Name (Last, First): <u>Citizens Against Bigger Planes</u>
2. <u>Contribution Amt.</u> \$ 30,000	5. Address: <u>PO BOX 5592</u>
3. <u>Aggregate Amt. *</u> \$ 80,000	6. City/State/Zip: <u>Snowmass Village, CO 81616</u>
<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 legal authorities: Political Pa Const. art. XXVIII, Sec. 3(3); Small Donor Committee – Colo. Const. art. XXVIII, Sec. 2(14); Pitkin County Candidate or Candidate Committe 6.6.2; Political Committee Supporting or Opposing Pitkin County Candidate(s) – HRC § 6.6.2.

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

I.C.R.S. 81-45-108(1)(a); HRC § 6.6.41

Full Name of Committee/Person: OAov

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>9/18/24</u>	4. Name (Last, First): <u>Edward Zasacky</u>
2. <u>Contribution Amt.</u> \$ <u>100</u>	5. Address: <u>315 S. 7th St</u>
3. <u>Aggregate Amt. *</u> \$ <u>100</u>	6. City/State/Zip: <u>Aspen, CO 81611</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>self</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>broker</u>

1. <u>Date Accepted</u> <u>9/18/24</u>	4. Name (Last, First): <u>Jackie Merrill</u>
2. <u>Contribution Amt.</u> \$ <u>250</u>	5. Address: <u>278 Oak Ridge Dr.</u>
3. <u>Aggregate Amt. *</u> \$ <u>250</u>	6. City/State/Zip: <u>Aspen, CO 81611</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	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> <u>9/18/24</u>	4. Name (Last, First): <u>Thomas Mooney</u>
2. <u>Contribution Amt.</u> \$ <u>100</u>	5. Address: <u>635 Vine St</u>
3. <u>Aggregate Amt. *</u> \$ <u>100</u>	6. City/State/Zip: <u>Aspen, CO 81611</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	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> <u>9/18/24</u>	4. Name (Last, First): <u>Polly Ross</u>
2. <u>Contribution Amt.</u> \$ <u>35</u>	5. Address: <u>PO Box 9969</u>
3. <u>Aggregate Amt. *</u> \$ <u>35</u>	6. City/State/Zip: <u>Aspen, CO 81612</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	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)

(C.R.S. §1-45-108(1)(a); HRC § 6.6.4)

Full Name of Committee/Person: DAOV

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 9/18/24	4. Name (Last, First): <u>Kate Spencer</u>
2. <u>Contribution Amt.</u> \$ 50	5. Address: <u>110 Aspen Village</u>
3. <u>Aggregate Amt. *</u> \$ 50	6. City/State/Zip: <u>Aspen, CO 81611</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Ajax Physical Therapy</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Physical Therapist</u>

1. <u>Date Accepted</u> 9/18/24	4. Name (Last, First): <u>James Hughes</u>
2. <u>Contribution Amt.</u> \$ 250	5. Address: <u>575 Madison Ave</u>
3. <u>Aggregate Amt. *</u> \$ 250	6. City/State/Zip: <u>New York, NY 10022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	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> 9/19/24	4. Name (Last, First): <u>Charles Hopton</u>
2. <u>Contribution Amt.</u> \$ 250	5. Address: <u>149 E Lupine Dr.</u>
3. <u>Aggregate Amt. *</u> \$ 250	6. City/State/Zip: <u>Aspen CO 81611</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	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> 9/30/24	4. Name (Last, First): <u>Citizens Against Bigger Planes</u>
2. <u>Contribution Amt.</u> \$ 30,000	5. Address: <u>PO Box 5592</u>
3. <u>Aggregate Amt. *</u> \$ 110,000	6. City/State/Zip: <u>Snowmass Village, CO 81616</u>
<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)

11-45-108(1)(a), C.R.S.1

Full Name of Committee/Person: DAOV

PLEASE PRINT/TYPE

1. Date Expended <u>7-25-24</u>	4. Name: <u>Aspen Daily News</u>
2. Amount \$ <u>210.00</u>	5. Address: <u>625 E. Main St Ste 204</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Aspen, CO 81611</u>
	7. Purpose of Expenditure: <u>Advertising</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>7-25-24</u>	4. Name: <u>4 degrees Digital</u>
2. Amount \$ <u>300.00</u>	5. Address: <u>8980 W. Tennessee Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Lakewood, CO 80226</u>
	7. Purpose of Expenditure: <u>advertising</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>7-25-24</u>	4. Name: <u>Tierney Lawrence Stiles</u>
2. Amount \$ <u>2,100.00</u>	5. Address: <u>225 E 16th Ave Ste 350</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>Legal fees</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>7-30-24</u>	4. Name: <u>4 degrees Digital</u>
2. Amount \$ <u>250.00</u>	5. Address: <u>8980 W. Tennessee Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Lakewood, CO 80226</u>
	7. Purpose of Expenditure: <u>Advertising</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>7-31-24</u>	4. Name: <u>Ignition Strategy Group</u>
2. Amount \$ <u>10,000.00</u>	5. Address: <u>1805 Columbine Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Boulder, CO 80302</u>
	7. Purpose of Expenditure: <u>Consulting</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: DAOV

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>8-2-24</u>	4. Name: <u>Angi Wang</u>
2. <u>Amount</u> \$ <u>450.00</u>	5. Address: <u>355 N. Mill St #314</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Aspen, CO 81611</u>
	7. Purpose of Expenditure: <u>notary service</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>8-2-24</u>	4. Name: <u>Deluxe</u>
2. <u>Amount</u> \$ <u>152.28</u>	5. Address: <u>801 S. Marquette Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Minneapolis, MN 55402</u>
	7. Purpose of Expenditure: <u>office expenses - checks</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>8-5-24</u>	4. Name: <u>Scarlett Greene</u>
2. <u>Amount</u> \$ <u>3,100.00</u>	5. Address: <u>191 University Blvd, Ste. 118</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver, CO 80206</u>
	7. Purpose of Expenditure: <u>Consulting</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>8-5-24</u>	4. Name: <u>Squarespace</u>
2. <u>Amount</u> \$ <u>231.42</u>	5. Address: <u>225 Varick St 12th Fl</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</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>8-26-24</u>	4. Name: <u>HVZ Design</u>
2. <u>Amount</u> \$ <u>3,800.00</u>	5. Address: <u>PO Box 80</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Basalt, CO 81621</u>
	7. Purpose of Expenditure: <u>Consulting</u>
	<input type="checkbox"/> Check box if Electioneering Communication

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

11-45-108(1)(a), C.R.S.1

Full Name of Committee/Person: OAov

PLEASE PRINT/TYPE

1. Date Expended <u>8-29-24</u>	4. Name: <u>Element 24</u>
2. Amount <u>\$ 12,500.00</u>	5. Address: <u>558 Castle Pines Pkwy</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Castle Pines, CO 80108</u>
	7. Purpose of Expenditure: <u>media-video production</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8-30-24</u>	4. Name: <u>Scarlett Greene</u>
2. Amount <u>\$ 2,500.00</u>	5. Address: <u>191 University Blvd Ste 118</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver CO 80206</u>
	7. Purpose of Expenditure: <u>Consulting</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8-30-24</u>	4. Name: <u>1st Bank</u>
2. Amount <u>\$ 16.00</u>	5. Address: <u>PO Box 150097</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Lakewood CO 80215</u>
	7. Purpose of Expenditure: <u>bank fees</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>9-3-24</u>	4. Name: <u>Kelsy Koenig</u>
2. Amount <u>\$ 5,000.00</u>	5. Address: <u>3905 Clearford Ct</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Westlake Village, CA 91361</u>
	7. Purpose of Expenditure: <u>Consulting</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>9-3-24</u>	4. Name: <u>Michael C. Ireland PC</u>
2. Amount <u>\$ 10,000.00</u>	5. Address: <u>515 Independence Place</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Aspen, CO 81611</u>
	7. Purpose of Expenditure: <u>Legal fees</u>
	<input type="checkbox"/> Check box if Electioneering Communication

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

F1-45-108(1)(a). C.R.S.1

Full Name of Committee/Person: DAOV

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>9-3-24</u>	4. Name: <u>Later. com</u>
2. <u>Amount</u> \$ <u>45.00</u>	5. Address: <u>53 State St.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Boston MA 02109</u>
	7. Purpose of Expenditure: <u>Social media platform</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9-10-24</u>	4. Name: <u>Basalt Printing & Art Supply</u>
2. <u>Amount</u> \$ <u>385.82</u>	5. Address: <u>23252 Two Rivers Rd</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Basalt CO 81621</u>
	7. Purpose of Expenditure: <u>Advertising - stickers</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9-11-24</u>	4. Name: <u>SDDIC</u>
2. <u>Amount</u> \$ <u>765.00</u>	5. Address: <u>WORKSHOP B, 3/F Manning Industrial Bldg</u> <u>116-118 How Ming St.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>KWUN TONG KI, HONG KONG CHINA</u>
	7. Purpose of Expenditure: <u>advertising-luggage tags</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9-13-24</u>	4. Name: <u>Ignition Strategy Group</u>
2. <u>Amount</u> \$ <u>10,000.00</u>	5. Address: <u>1805 Columbine Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Boulder CO 80302</u>
	7. Purpose of Expenditure: <u>Consulting</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9-13-24</u>	4. Name: <u>Aspen Daily News</u>
2. <u>Amount</u> \$ <u>1,027.50</u>	5. Address: <u>625 E. Main St Ste 204</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Aspen CO 81611</u>
	7. Purpose of Expenditure: <u>Advertising</u>
	<input type="checkbox"/> Check box if Electioneering Communication

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

Full Name of Committee/Person: DAOV

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>9-17-24</u>	4. Name: <u>Remix Media Group</u>
2. <u>Amount</u> <u>\$ 8,000.00</u>	5. Address: <u>PO Box 4001</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Basalt, CO 81621</u>
	7. Purpose of Expenditure: <u>Advertising</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9-19-24</u>	4. Name: <u>Basalt Printing + Art Supply</u>
2. <u>Amount</u> <u>\$ 326.03</u>	5. Address: <u>23252 Two Rivers Rd</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Basalt CO 81621</u>
	7. Purpose of Expenditure: <u>Lit piece</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9-19-24</u>	4. Name: <u>Fund Hero</u>
2. <u>Amount</u> <u>\$ 30.90</u>	5. Address: <u>243 E. 400 S Ste. B-100</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Salt Lake City UT 84101</u>
	7. Purpose of Expenditure: <u>bank fees</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9-20-24</u>	4. Name: <u>Political Lawn Signs</u>
2. <u>Amount</u> <u>\$ 981.78</u>	5. Address: <u>916 Byrd Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Neenah WI 54956</u>
	7. Purpose of Expenditure: <u>Yard signs - advertising</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9-23-24</u>	4. Name: <u>Kelsy Koenig</u>
2. <u>Amount</u> <u>\$ 440.00</u>	5. Address: <u>3905 Clearford Ct</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Westlake Village CA 91361</u>
	7. Purpose of Expenditure: <u>Consulting</u>
	<input type="checkbox"/> Check box if Electioneering Communication

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

Full Name of Committee/Person: OAOV

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>9-23-24</u>	4. Name: <u>META</u>
2. <u>Amount</u> \$ <u>100.00</u>	5. Address: <u>1 Hacker Way</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Menlo Park, CA 94025</u>
	7. Purpose of Expenditure: <u>Advertising</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9-24-24</u>	4. Name: <u>Recht Kornfeld PC</u>
2. <u>Amount</u> \$ <u>5,510.00</u>	5. Address: <u>1600 Stout St, Ste 1400</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>Legal fees</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9-24-24</u>	4. Name: <u>Basalt Printing + Art Supply</u>
2. <u>Amount</u> \$ <u>870.85</u>	5. Address: <u>23252 TWO Rivers Rd</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Basalt CO 81621</u>
	7. Purpose of Expenditure: <u>Lit piece</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9-30-24</u>	4. Name: <u>1st Bank</u>
2. <u>Amount</u> \$ <u>109.30</u>	5. Address: <u>PO Box 150097</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Lakewood, CO 80215</u>
	7. Purpose of Expenditure: <u>bank fees</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10-1-24</u>	4. Name: <u>KRS Strategy Group</u>
2. <u>Amount</u> \$ <u>12,000.00</u>	5. Address: <u>1552 Jesse Ln</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Golden CO 80403</u>
	7. Purpose of Expenditure: <u>Consulting - digital ads</u> <input type="checkbox"/> Check box if Electioneering Communication

Schedule B – Itemized Expenditures Statement (\$20 or more)
11-45-108(1)(a), C.R.S.1

Full Name of Committee/Person: DAOV

PLEASE PRINT/TYPE

1. Date Expended <u>10-1-24</u>	4. Name: <u>Later.com</u>
2. Amount <u>\$ 45.00</u>	5. Address: <u>53 State St</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Boston MA 02109</u>
	7. Purpose of Expenditure: <u>social media platform</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10-2-24</u>	4. Name: <u>Aspen Daily News</u>
2. Amount <u>\$ 1,935.00</u>	5. Address: <u>625 E. Main St Ste 204</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Aspen CO 81611</u>
	7. Purpose of Expenditure: <u>advertising</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10-3-24</u>	4. Name: <u>META</u>
2. Amount <u>\$ 400.00</u>	5. Address: <u>1 Hacker Way</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Menlo Park CA 94025</u>
	7. Purpose of Expenditure: <u>advertising</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10-4-24</u>	4. Name: <u>Mission Control</u>
2. Amount <u>\$ 9,472.32</u>	5. Address: <u>624 Hebron Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Glastonbury, CT 06033</u>
	7. Purpose of Expenditure: <u>mail</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10-4-24</u>	4. Name: <u>Scarlett Greene</u>
2. Amount <u>\$ 2,500.00</u>	5. Address: <u>191 University Blvd Ste. 118</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver CO 80206</u>
	7. Purpose of Expenditure: <u>consulting</u>
	<input type="checkbox"/> Check box if Electioneering Communication

Schedule B – Itemized Expenditures Statement (\$20 or more)
11-45-108(1)(a), C.R.S.1

Full Name of Committee/Person: OADV

PLEASE PRINT/TYPER

1. <u>Date Expended</u> <u>10-4-24</u>	4. Name: <u>HVZ Design</u>
2. <u>Amount</u> \$ <u>381.25</u>	5. Address: <u>PO Box 86</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Basalt CO 81621</u>
	7. Purpose of Expenditure: <u>Consulting</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10-8-24</u>	4. Name: <u>Basalt Printing + Art Supply</u>
2. <u>Amount</u> \$ <u>596.34</u>	5. Address: <u>23252 TWO Rivers Rd</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Basalt CO 81621</u>
	7. Purpose of Expenditure: <u>Lit piece</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10-9-24</u>	4. Name: <u>Political Lawn Signs</u>
2. <u>Amount</u> \$ <u>779.10</u>	5. Address: <u>916 Byrd Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Neenah WI 54956</u>
	7. Purpose of Expenditure: <u>yard signs</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10-10-24</u>	4. Name: <u>Mission Control</u>
2. <u>Amount</u> \$ <u>9,453.32</u>	5. Address: <u>624 Hebron Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Glastonbury CT 06033</u>
	7. Purpose of Expenditure: <u>mail</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10-10-24</u>	4. Name: <u>META</u>
2. <u>Amount</u> \$ <u>700.00</u>	5. Address: <u>1 Hacker Way</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Menlo Park CA 94025</u>
	7. Purpose of Expenditure: <u>advertising</u>
	<input type="checkbox"/> Check box if Electioneering Communication

Schedule C - Loans

Full Name of Committee/Person: _____

LOANS - Loans Owed by the Committee

(Use a separate schedule for each loan. This form is for line item 8 and 16 of the Detailed Summary Report.)

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

LOAN SOURCE

Name (Last, First or Institution): N/A

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: _____

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. Comment (Optional): _____

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): _____

Statement of Non-Monetary Contributions

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

Full Name of Committee/Person: DAOV

PLEASE PRINT/TYPE

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

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

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

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

DETAILED SUMMARY

Full Name of Committee/Candidate: _____

Current Reporting Period: 7/21/24 Through 10/10/24

	Funds on hand at the beginning of reporting period (Monetary Only)	\$ 0
6	Itemized Contributions of \$20 or More <small>[C.R.S. §1-45-108(1)(a); HRC §6.6.4] (Please list on Schedule "A")</small>	\$ 121,433.00
7	Total of Non-Itemized Contributions <small>(Individual Contributions of \$19.99 and Less)</small>	\$ (included above amt)
8	Loans Received <small>(Please list on Schedule "C")</small>	\$ 0
9	Total of Other Receipts <small>(Interest, Dividends, etc.)</small>	\$ 0
10	Returned Expenditures (from recipient) <small>(Please list on Schedule "D")</small>	\$ 0
11	Total Monetary Contributions <small>(Total of Lines 6 through 10)</small>	\$ 121,433.00
12	Total Non-Monetary Contributions <small>(From Statement of Non-Monetary Contributions)</small>	\$ 0
13	Total Contributions <small>(Line 11 + Line 12)</small>	\$ 0
14	Itemized Expenditures \$20 or More <small>[C.R.S. §1-45-108(1)(a); HRC § 6.6.4] (Please list on Schedule "B")</small>	\$ 117,424.21
15	Total of Non-Itemized Expenditures <small>(Expenditures of \$19.99 or Less)</small>	\$ 0
16	Loan Repayments Made <small>(Please list on Schedule "C")</small>	\$ 0
17	Returned Contributions (to donor) <small>(Please list on Schedule "D")</small>	\$ 0
18	Total Expenditure by third party controlled by or coordinated with a candidate, candidate committee or political party. <small>(Statement of Non-Monetary Contribution form)</small>	\$ 0
19	Total Monetary Expenditures <small>(Total of Lines 14 through 17)</small>	117,424.21
20	Total Spending <small>(Line 18 + line 19)</small>	\$ 117,424.21

