

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

REPORT OF CONTRIBUTIONS AND EXPENDITURES

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

Full Name of Committee/Person:	The Committee to Elect Val Leal-Whitehead Ward 3
As Shown On Registration	
Address of Committee/Person:	6050 W. 26 th Street
City, State & Zip Code:	Greeley, CO 80634
Committee Type:	
Name and Address of Financial Institution	Bank of Colorado 3459 W. 20 th St. Greeley, CO 80634

SOS ID NUMBER (state and county committees): NA

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: 08/01/2025 Through 09/05/2025
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
2	Total Monetary Contributions (line 11)	\$ 4,015
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$
4	Total Monetary Expenditures (line 19)	\$ 645
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 3,370


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: Valerie Leal-Whitehead

Candidates Signature:  Date: 09/05/2025

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

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

Full Name of Committee/Person: The Committee to Elect Val Leal-Whitehead Ward 3

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

PLEASE PRINT/TYPE

1. Date Accepted <u>8/11/2025</u>	4. Name (Last, First): <u>Riley, Dianna</u>
2. Contribution Amt. \$ <u>100⁰⁰</u>	5. Address: <u>2026 65th Avenue</u>
3. Aggregate Amt. * \$	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, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

1. Date Accepted <u>8/11/2025</u>	4. Name (Last, First): <u>Sanchez, Aaron; Curry, Anne</u>
2. Contribution Amt. \$ <u>200⁰⁰</u> 8/11/2025	5. Address: <u>1527 44th Ave. Court</u>
3. Aggregate Amt. * \$	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, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

1. Date Accepted <u>8/14/2025</u>	4. Name (Last, First): <u>Kathy Horning, Kathy</u>
2. Contribution Amt. \$ <u>20⁰⁰</u>	5. Address: <u>24210 CR 43 LaSalle</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>LaSalle, CO 80645</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Cash</u>
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>):

1. Date Accepted <u>8/16/2025</u>	4. Name (Last, First): <u>Bellman, Jonathon and Kauffman, Deborah</u>
2. Contribution Amt. \$ <u>100⁰⁰</u>	5. Address: <u>2611 52nd Avenue</u>
3. Aggregate Amt. * \$	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, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <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: The Committee to Elect Val Leal - Whitehead Ward 3

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

PLEASE PRINT/TYPE

1. Date Accepted <u>08/19/2025</u>	4. Name (Last, First): <u>Witwer, James</u>
2. Contribution Amt. \$ <u>50⁰⁰</u>	5. Address: <u>125 N. Jasmine St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Denver, CO 80220</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>e-donation</u>
	8. Employer (if applicable, mandatory): <u>Self</u>
	9. Occupation (if applicable, mandatory): <u>A Attorney</u>

1. Date Accepted <u>08/23/2025</u>	4. Name (Last, First): <u>Campos-Spitze, Brenda</u>
2. Contribution Amt. \$ <u>100⁰⁰</u>	5. Address: <u>1714 22nd Ave.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Greeley, CO 80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>e-donation</u>
	8. Employer (if applicable, mandatory): <u>Sunrise Community Health</u>
	9. Occupation (if applicable, mandatory): <u>Physician</u>

1. Date Accepted <u>08/24/2025</u>	4. Name (Last, First): <u>Lockhart, Carol</u>
2. Contribution Amt. \$ <u>150⁰⁰</u>	5. Address: <u>829 6th</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Las Animas, CO 81054</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>e-donation</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>08/26/2025</u>	4. Name (Last, First): <u>Marrs, Bart</u>
2. Contribution Amt. \$ <u>50⁰⁰</u>	5. Address: <u>117 Rock Bridge Ct.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Windsor, CO 80550</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>e-donation</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

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PROHIBITED CONTRIBUTIONS

[Art. XXVIII, Sec.3 & C.R.S. 1-45-105.5]

- No candidate's candidate committee shall accept contributions from, or make contributions to, another candidate committee.
- No person shall act as a conduit for a contribution to a candidate committee.
- It shall be unlawful for a corporation or labor organization to make contributions to a candidate committee or a political party, and to make expenditures expressly advocating the election or defeat of a candidate; except that a corporation or labor organization may establish a political committee or small donor committee which may accept contributions or dues from employees, officeholders, shareholders, or members.
- No candidate committee, political committee, small donor committee, or political party shall knowingly accept contributions from:
 - Any natural person who is not a citizen of the United States;
 - A foreign government; or
 - any foreign corporation that does not have the authority to transact business in this state pursuant to article 115 of title 7, C.R.S., or any successor section.
- No candidate committee, political committee, small donor committee, issue committee, or political party shall accept a contribution, or make an expenditure, in currency or coin exceeding one hundred dollars.
- No person shall make a contribution to a candidate committee, issue committee, political committee, small donor committee, or political party **with the expectation that some or all of the amounts of such contribution will be reimbursed by another person.** No person shall be reimbursed for a contribution made to any candidate committee, issue committee, political committee, small donor committee, or political party, nor shall any person make such reimbursement except as provided in subsection (8) of this section. [Art. XXVIII, Sec. 3(8)]
- Contributions from professional and volunteer lobbyists to any member of or candidate for the general assembly, or the governor or candidate for governor are prohibited during regular legislative session.
- Political Committees may contribute to a legislator during session, unless the political committee employs, retains, engages, or uses, with or without compensation, a professional or volunteer lobbyist.

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

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

Full Name of Committee/Person: The Committee to Elect Val Leal- Whitehead Ward 3

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

PLEASE PRINT/TYPE

1. Date Accepted <u>08/28/2025</u>	4. Name (Last, First): <u>Kathy + Mike Sage</u>
2. Contribution Amt. \$ <u>50⁰⁰</u>	5. Address: <u>4036 W. 15th St.</u>
3. Aggregate Amt. * \$	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):
	9. Occupation (if applicable, mandatory): <u>Retired, Retired</u>

1. Date Accepted <u>08/28/2025</u>	4. Name (Last, First): <u>Kathy + Elton Hagihara (Hagihara)</u>
2. Contribution Amt. \$ <u>100⁰⁰</u>	5. Address: <u>4286 15th St. Lane</u>
3. Aggregate Amt. * \$	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):
	9. Occupation (if applicable, mandatory): <u>Retired, Retired</u>

1. Date Accepted <u>08/28/2025</u>	4. Name (Last, First): <u>Andrade, Joanne</u>
2. Contribution Amt. \$ <u>100⁰⁰</u>	5. Address: <u>4167 AA St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Greeley, CO</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>Retired</u>

1. Date Accepted <u>08/28/2025</u>	4. Name (Last, First): <u>Marcia + Bill Bohnenblust</u>
2. Contribution Amt. \$ <u>200⁰⁰</u>	5. Address: <u>2501 57th Ave</u>
3. Aggregate Amt. * \$	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):
	9. Occupation (if applicable, mandatory): <u>Retired, 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: The Committee to Elect Val Leal-Whitchard Ward 3

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

PLEASE PRINT/TYPE

1. Date Accepted <u>08/28/2025</u>	4. Name (Last, First): <u>Craig + Cherise DeKraai, Craig + Chrise</u>
2. Contribution Amt. \$ <u>200⁰⁰</u>	5. Address: <u>821 50th Ave.</u>
3. Aggregate Amt. * \$ <u>200</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): _____
	9. Occupation (if applicable, mandatory): <u>Retired, Retired</u>

1. Date Accepted <u>08/26/2025</u>	4. Name (Last, First): <u>Celia Scholl, Celia</u>
2. Contribution Amt. \$ <u>50⁰⁰</u>	5. Address: <u>1305 6th St.</u>
3. Aggregate Amt. * \$ _____	6. City/State/Zip: <u>Greeley, CO 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): _____

1. Date Accepted <u>08/26/2025</u>	4. Name (Last, First): <u>Janis Dunn, Janis</u>
2. Contribution Amt. \$ <u>1,000⁰⁰</u>	5. Address: <u>1309 45th Ave.</u>
3. Aggregate Amt. * \$ _____	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): _____
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>09/02/2025</u>	4. Name (Last, First): <u>Ricketts, Valerie + Bob</u>
2. Contribution Amt. \$ <u>100⁰⁰</u>	5. Address: <u>4495 W. Pioneer Drive</u>
3. Aggregate Amt. * \$ _____	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): _____
	9. Occupation (if applicable, mandatory): <u>Seamstress, 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: The Committee to Elect Val Leal-Whitehead Ward 3

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

PLEASE PRINT/TYPE

1. Date Accepted <u>09/02/2025</u>	4. Name (Last, First): <u>Robb, Scott + Connie</u>
2. Contribution Amt. \$ <u>50⁰⁰</u>	5. Address: <u>2610 61st Ave.</u>
3. Aggregate Amt. * \$	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):
	9. Occupation (if applicable, mandatory): <u>Retired, Retired</u>

1. Date Accepted <u>09/02/2025</u>	4. Name (Last, First): <u>Garcia, Connie</u>
2. Contribution Amt. \$ <u>50⁰⁰</u>	5. Address: <u>2400 10th Ave. Ct</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Greeley, CO 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):

1. Date Accepted <u>09/02/2025</u>	4. Name (Last, First): <u>Shepherd, Jeri D.</u>
2. Contribution Amt. \$ <u>200⁰⁰</u>	5. Address: <u>1713 Fairacre Road</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Greeley, CO 80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, mandatory): <u>Self employed</u>
	9. Occupation (if applicable, mandatory): <u>Attorney</u>

1. Date Accepted <u>09/02/2025</u>	4. Name (Last, First): <u>Dewars, Mary Jane</u>
2. Contribution Amt. \$ <u>50⁰⁰</u>	5. Address: <u>7003 Poudre River Rd. #5</u>
3. Aggregate Amt. * \$	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):
	9. Occupation (if applicable, mandatory):

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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: The Committee to Elect Val Leal - Whitehead Ward 3

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

PLEASE PRINT/TYPE

1. Date Accepted <u>09/02/2025</u>	4. Name (Last, First): <u>Speed, Karen</u>
2. Contribution Amt. \$ <u>70⁰⁰</u>	5. Address: <u>8310 Cherry Blossom Drive</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Windsor, CO 80550</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check cash</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>09/02/2025</u>	4. Name (Last, First): <u>Monson, Marlene</u>
2. Contribution Amt. \$ <u>100⁰⁰</u>	5. Address: <u>7147 W. Canberra St.</u>
3. Aggregate Amt. * \$	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):
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>09/02/2025</u>	4. Name (Last, First): <u>St Gaffney-Barile, Shaunda</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>7201 W. Canberra St.</u>
3. Aggregate Amt. * \$	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):
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>08/18/2025</u>	4. Name (Last, First): <u>Adams, Mary</u>
2. Contribution Amt. \$ <u>25⁰⁰</u>	5. Address:
3. Aggregate Amt. * \$	6. City/State/Zip: <u>No info</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>e-donation</u> <u>available</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

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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: The Committee to Elect Val Leal-Whithead Ward 3

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

PLEASE PRINT/TYPE

1. Date Accepted <u>08/31/2025</u>	4. Name (Last, First): <u>Pring, Matthew</u>
2. Contribution Amt. \$ <u>100⁰⁰</u>	5. Address: _____
3. Aggregate Amt. * \$ _____	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>electronic via website, no info</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>09/01/2025</u>	4. Name (Last, First): <u>Simmons, Tiffany</u>
2. Contribution Amt. \$ <u>50⁰⁰</u>	5. Address: <u>1626 27th Ave. Ct</u>
3. Aggregate Amt. * \$ _____	6. City/State/Zip: <u>Greeley, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>e-donation</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>09/02/2025</u>	4. Name (Last, First): <u>Limpitlaw, Ulli</u>
2. Contribution Amt. \$ <u>100⁰⁰</u>	5. Address: <u>1605 11th St.</u>
3. Aggregate Amt. * \$ _____	6. City/State/Zip: <u>Greeley, CO 80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>e-donation</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>09/02/2025</u>	4. Name (Last, First): <u>Jarman, Karen</u>
2. Contribution Amt. \$ <u>50⁰⁰</u>	5. Address: <u>214 49th Ave.</u>
3. Aggregate Amt. * \$ _____	6. City/State/Zip: <u>Greeley, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>e-donation</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): <u>Retired</u>

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

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

Full Name of Committee/Person: The Committee to Elect Val Leal Whitehead Ward 3

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

PLEASE PRINT/TYPE

1. Date Accepted <u>8/28/2025</u>	4. Name (Last, First): <u>Reimers, Julie</u>
2. Contribution Amt. \$ <u>100⁰⁰</u>	5. Address: <u>4492 Pioneer Dr.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Greeley, CO 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>e-donation</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>8/29/2025</u>	4. Name (Last, First): <u>Weaver, Kenneth</u>
2. Contribution Amt. \$ <u>100⁰⁰</u>	5. Address:
3. Aggregate Amt. * \$	6. City/State/Zip:
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>e-donation</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>8/29/2025</u>	4. Name (Last, First): <u>Martin, Linda</u>
2. Contribution Amt. \$ <u>100⁰⁰</u>	5. Address: <u>1916 Glenmere Blvd</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Greeley, CO 80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>e-donation</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted <u>8/29/2025</u>	4. Name (Last, First): <u>Cooper, Bruce</u>
2. Contribution Amt. \$	5. Address: <u>1863 13th Ave.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Greeley, CO 80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>e-donation</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory): <u>Retired</u>

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

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

Full Name of Committee/Person: The Committee to Elect Val Leal-Whitehead Ward 3

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 09/04/2025	4. Name (Last, First): <u>Parks, Marshall</u>
2. <u>Contribution Amt.</u> \$ <u>100⁰⁰</u>	5. Address: <u>4040 W. 15th St.</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>e-donation</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>UNC</u> [↑] <u>as needed, short term</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired / partial / administration</u> [↑] <u>administ.</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).

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

Full Name of Committee/Person: ^{The} Committee to Elect Val Leal-Whitehead Word 3

PLEASE PRINT/TYPE

1. <u>Date Provided</u> 08/28/2025	4. Name (Last, First): <u>Mike & Kathy Sage</u>
2. <u>Fair Market Value</u> \$ 85 ⁰⁰	5. Address: <u>4036 W. 15th St.</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>Hosted fundraiser</u>
	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> 09/02/2025	4. Name (Last, First): <u>Jeff & Diana Riley</u>
2. <u>Fair Market Value</u> \$ 85 ⁰⁰	5. Address: <u>2026 65th Ave.</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>Hosted Fundraiser</u>
	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."

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

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

Full Name of Committee/Person: The Committee to Elect Val Leal-Whitehead Ward 3

PLEASE PRINT/TYPE

1. Date Expended <u>8/13/25</u>	4. Name: <u>Vivian Watson</u>
2. Amount \$ <u>317¹³</u>	5. Address: <u>4494 W. Pioneer Dr.</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>T-shirts</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8/22/25</u>	4. Name: <u>Valerie Leal-Whitehead</u>
2. Amount \$ <u>192⁶²</u>	5. Address: <u>6050 W. 26th St.</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>Remittance envelopes</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8/22/25</u>	4. Name: <u>Valerie Leal-Whitehead</u>
2. Amount \$ <u>50⁰⁰</u>	5. Address: <u>6050 W. 26th St.</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>Voter list / weld Cty Elections</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8/22/25</u>	4. Name: <u>Kathy Sage</u>
2. Amount \$ <u>37⁹⁹</u>	5. Address: <u>4036 15th St.</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>Flyers</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8/25/25</u>	4. Name: <u>Delia Haeefeli</u>
2. Amount \$ <u>47⁰⁰</u>	5. Address: <u>1446 43rd Ave</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>Business Cards</u>
	<input type="checkbox"/> Check box if Electioneering Communication

DETAILED SUMMARYFull Name of Committee/Person: The Committee to Elect Val Leal-Whitchcad Ward 3Current Reporting Period: 06/01/2025Through 09/05/2025

Funds on hand at the beginning of reporting period (Monetary Only)		\$ 0
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 4,015
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)	\$ 4,015
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 170 ⁰⁰
13	Total Contributions (Line 11 + line 12)	\$ 4,185
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 645
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)	\$ 645
20	Total Spending (Line 18 + line 19)	\$ 645