

Pitkin County Clerk and Recorder  
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space below for office use only



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 150397 Lakewood CO 80215

Type of Report

- Regularly Scheduled Filing.
- Amended Filing. This amends previous report filed on (date)
- 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
2	Total Monetary Contributions (line 11)	\$ 0
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 0
4	Total Monetary Expenditures (line 19)	\$ 0
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 0

**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: 7/25/2024

Print Candidate Name: N/A

Candidate's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

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

Full Name of Committee/Person: Our Airport Our Vote

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</u> \$	5. Address: <u>n/a</u>
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> ): _____

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

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

Full Name of Committee/Person: Our Airport Our Vote

PLEASE PRINT/TYPE

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u>	5. Address: <u>n/a</u>
\$	6. City/State/Zip: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	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: _____
\$	6. City/State/Zip: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	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: _____
\$	6. City/State/Zip: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	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: _____
\$	6. City/State/Zip: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	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: _____
\$	6. City/State/Zip: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	7. Purpose of Expenditure: _____ <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): \_\_\_\_\_

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: _____

*N/A*

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): _____

*N/A*

**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: Over Airport Our Vote

PLEASE PRINT/TYPE

1. <u>Date Provided</u> 7-1-24	4. Name (Last, First): <u>Citizens Against Bigger Planes</u>
2. <u>Fair Market Value</u> \$ 922.50	5. Address: <u>35 Lower Woodbridge Rd A102</u>
3. <u>Aggregate Amt.</u> \$ 922.50	6. City/State/Zip: <u>Snowmass CO 81615</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>"in-kind" donation of t-shirts</u>
	8. Employer (if applicable, mandatory): <u>Inkswell 2550 Hwy82</u>
	9. Occupation (if applicable, mandatory): <u>Glenwood Springs, CO 81601</u>
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. <u>Date Provided</u> 6/30/24	4. Name (Last, First): <u>Citizens Against Bigger Planes</u>
2. <u>Fair Market Value</u> \$ 10,000	5. Address: <u>35 Lower Woodbridge Rd A102</u>
3. <u>Aggregate Amt.</u> \$ 10,000	6. City/State/Zip: <u>Snowmass, CO 81615</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>"in-kind" donation of consulting</u>
	8. Employer (if applicable, mandatory): <u>Ignition Strategy Group 1805 Columbine Ave</u>
	9. Occupation (if applicable, mandatory): <u>Boulder, CO 80302</u>
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. <u>Date Provided</u> 6/28/24	4. Name (Last, First): <u>Citizens Against Bigger Planes</u>
2. <u>Fair Market Value</u> \$ 78.00	5. Address: <u>35 Lower Woodbridge Rd A102</u>
3. <u>Aggregate Amt.</u> \$ 78.00	6. City/State/Zip: <u>Snowmass, CO 81615</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>"in-kind" donation of meals</u>
	8. Employer (if applicable, mandatory): <u>Steeps Aspen 316 Aspen Airport Business Center B</u>
	9. Occupation (if applicable, mandatory): <u>Aspen, CO 81611</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."

**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: Our Airport Our Vote

PLEASE PRINT/TYPE

1. Date Provided <u>6/26/24</u>	4. Name (Last, First): <u>Citizens Against Bigger Planes</u>
2. Fair Market Value \$ <u>19,695</u>	5. Address: <u>35 Lower Woodbridge Rd A102</u>
3. Aggregate Amt. \$ <u>19,695</u>	6. City/State/Zip: <u>Snowmass, CO 81615</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>"in-kind" donation of legal services</u>
	8. Employer (if applicable, mandatory): <u>Recht Kornfeld 1600 Stout St</u>
	9. Occupation (if applicable, mandatory): <u>Denver, CO 80202</u>
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. Date Provided <u>6/20/24</u>	4. Name (Last, First): <u>Citizens Against Bigger Planes</u>
2. Fair Market Value \$ <u>1,311.30</u>	5. Address: <u>35 Lower Woodbridge Rd A102</u>
3. Aggregate Amt. \$ <u>1,311.30</u>	6. City/State/Zip: <u>Snowmass, CO 81615</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>"in-kind" donation of printing petitions</u>
	8. Employer (if applicable, mandatory): <u>Basalt office + Art Supply 23252 Two Rivers Rd</u>
	9. Occupation (if applicable, mandatory): <u>Basalt, CO 81621</u>
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. Date Provided <u>7/8/24</u>	4. Name (Last, First): <u>Citizens Against Bigger Planes</u>
2. Fair Market Value \$ <u>1,590</u>	5. Address: <u>35 Lower Woodbridge Rd A102</u>
3. Aggregate Amt. \$ <u>1,590</u>	6. City/State/Zip: <u>Snowmass, CO 81615</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>"in-kind" donation of web design</u>
	8. Employer (if applicable, mandatory): <u>HVZ Design PO Box 1163</u>
	9. Occupation (if applicable, mandatory): <u>Carbondale, CO 81623</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: Our Airport Our Vote

Current Reporting Period: \_\_\_\_\_ Through \_\_\_\_\_

Funds on hand at the beginning of reporting period (Monetary Only)		\$ 0
6	<b>Itemized Contributions of \$20 or More</b> <small>(C.R.S. §1-45-108(1)(a); HRC §6.6.4) (Please list on Schedule "A")</small>	\$ 0
7	<b>Total of Non-Itemized Contributions</b> <small>(Individual Contributions of \$19.99 and Less)</small>	\$ 0
8	<b>Loans Received</b> <small>(Please list on Schedule "C")</small>	\$ 0
9	<b>Total of Other Receipts</b> <small>(Interest, Dividends, etc.)</small>	\$ 0
10	<b>Returned Expenditures (from recipient)</b> <small>(Please list on Schedule "D")</small>	\$ 0
11	<b>Total Monetary Contributions</b> <small>(Total of Lines 6 through 10)</small>	\$ 0
12	<b>Total Non-Monetary Contributions</b> "in-kind" <small>(From Statement of Non-Monetary Contributions)</small>	\$ 33,596.80
13	<b>Total Contributions</b> <small>(Line 11 + Line 12)</small>	\$ 33,596.80
14	<b>Itemized Expenditures \$20 or More</b> (C.R.S. §1-45-108(1)(a); HRC § 6.6.4) <small>(Please list on Schedule "B")</small>	\$ 0
15	<b>Total of Non-Itemized Expenditures</b> <small>(Expenditures of \$19.99 or Less)</small>	\$ 0
16	<b>Loan Repayments Made</b> <small>(Please list on Schedule "C")</small>	\$ 0
17	<b>Returned Contributions (to donor)</b> <small>(Please list on Schedule "D")</small>	\$ 0
18	<b>Total Expenditure by third party controlled by or coordinated with a candidate, candidate committee or political party.</b> <small>(Statement of Non-Monetary Contribution form)</small>	\$ 0
19	<b>Total Monetary Expenditures</b> <small>(Total of Lines 14 through 17)</small>	\$ 0
20	<b>Total Spending</b> <small>(Line 18 + line 19)</small>	\$ 0