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:	Vote Forz TONI KRONBERG		
	hown On Pitkin County Committee Registration		
Address of Committee/Candidate:	PO 132		
City, State & Zip Code:	SNOW MACS (0 81654		
Committee Type:	CANDIDATE		
Name and Address of Financial Institution	Alpine BANK 600 E. HOPKINS		
Type of Report	ASPEN, COLO 81611		
Regularly Scheduled Filing.			
Amended Filing. This amends previous Submit changes or new information ON			
Termination Report. (Termination	on Reports MUST Have a Monetary Balance of Zero in Line 5)		
VZD	ontains Electioneering Communications Information		
Reporting Period Covered:  Declared Total Spending (if applicable)	1, 16, 2024 Through 10-27-2024  Date  Date		
(Art. XXVIII, Sec. 4(1))	\$ 124.57		
	Totals Detailed Summary Page		
1 Funds on Hand at the Beginning of Reporting Period (monetary only) \$ 3 26 58			
2 Total Monetary Contributions (line 11) \$			
3 Total of Monetary Contributions & Beginning Amount (line 1+ line 2) \$ 326.58			
4 Total Monetary Expenditures (line 19) \$ 3 7 , 1   5   Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4) \$ 9 , 4 7			
5 Funds on Hand at the End of Reportin	ing Period (monetary) (line 3 – line 4) \$ 9,47		
penalty of perjury, that to the best of my ki including any contributions received in the permissible sources.	her the Registered Agent OR the Candidate): I hereby certify and declare, under knowledge or belief all contributions received during this reporting period, e form of membership dues transferred by a membership organization, are from		
Print Registered Agent's Name:	1Athy Welgos		
Registered Agent's Signature	Date: 10-3/-24		
Print Candidate Name:			
Candidate's Signature: _	_ Date: 0 0 1 30, 200 4		
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## **DETAILED SUMMARY** ION: FOR Full Name of Committee/Candidate: Current Reporting Period: OCT, 16, 2021 **Through** Funds on hand at the beginning of reporting period (Monetary Only) \$ \$ 6 Itemized Contributions of \$20 or More [C.R.S. §1-45-108[1](a); HRC §6.6.4] (Please list on Schedule "A") **Total of Non-Itemized Contributions** Ŝ (Individual Contributions of \$19.99 and Less) 8 **Loans Received** \$ (Please list on Schedule "C") 9 **Total of Other Receipts** \$ (Interest, Dividends, etc.) \$ 10 **Returned Expenditures (from recipient)** (Please list on Schedule "D") **Total Monetary Contributions** 11 \$ (Total of Lines 6 through 10) 12 **Total Non-Monetary Contributions** \$ (From Statement of Non-Monetary Contributions) 13 **Total Contributions** \$ (Line 11 + Line 12) \$ Itemized Expenditures \$20 or More [C.R.S. \$1-45-108[1](a)]; HRC \$ 6.6.4] 14 (Please list on Schedule "B") **Total of Non-Itemized Expenditures** 15 \$ (Expenditures of \$19.99 or tess) Loan Repayments Made \$ 16 (Please list on Schedule "C") **Returned Contributions (to donor)** \$ 17 (Please list on Schedule "D") 18 Total Expenditure by third party controlled by or \$ coordinated with a candidate, candidate committee or political party. (Statement of Non-Monetary Contribution form) 317.11 19 **Total Monetary Expenditures** (Total of Lines 14 through 17) **Total Spending** 20 Ŝ (Line 18 + line 19)

Schedule B – Itemized Expenditures Statement (\$20 or more)			
Full Name of Committee/Person: Vote FOR TON!			
PLEASE PRINT/TYPE	4		
1. Date Expended	4. Name: City MARKET		
2. Amount	5. Address: 250 E, VALLY ROAD		
\$ 12.9b 3.Recipient is (optional):	6. City/State/Zip: EL Jebel (0 81623		
Committee	7. Purpose of Expenditure: COPY PAPER		
☐ Non-Committee	Check box if Electioneering Communication		
1. <u>Date Expended</u> OCT, 2-1	4. Name: OLD SNOWMSS MARILET		
2. Amount	5. Address: 2600 Hwy. 82		
\$ 3,44 3.Recipient is (optional):	6. City/State/Zip: SNOWMASS, CO 81654		
Committee	7. Purpose of Expenditure: Permanent Maic Marier  PCheck box if Electioneering Communication  (RED)		
	Check box if Electioneering Communication		
1. Date Expended  6 ( 2)	4. Name: OCD SNOWMOS MARKET  5. Address: 26800 Hwy. 82		
2. <u>Amount</u> \$ 3,44			
3.Recipient is (optional):	6. City/State/Zip: SNOWMSS (O 81654		
Committee  Non-Committee	7. Purpose of Expenditure: PERMANENT MGIC MARICER  CBUCK  CBUCK		
1. Date Expended OCT. 21	4. Name: BASACT LibRARY		
2. Amount	5. Address: IY MIDLAND AUL,		
\$ 4,80 3.Recipient is (optional):	6. City/State/Zip: BACLT, (0 81621		
Committee	7. Purpose of Expenditure:		
L. Non-Committee	Check box if Electioneering Communication		
1. Date Expended	4. Name: Mother LOAD Menchutile		
2. Amount	5. Address: 32046 JACK GREdia UNE		
\$ \(\frac{1}{3}\). Recipient is (optional):	6. City/State/Zip: ASpen, O 81611		
Committee	7. Purpose of Expenditure: photo CARDS		
☐ Non-Committee	SPCheck box if Electioneering Communication		

	Schedule B – Itemized Expenditures Statement (\$20 or more)	
Full Name of Committee/Person: Vate For TON?		
PLEASE PRINT/TYPE		
1. Date Expended Act, 21,24	4. Name: CARUS PHARMCY	
2. <u>Amount</u> s 13,09	5. Address: 306 E, mAIN ST. A	
3.Recipient is (optional):	6. City/State/Zip: ASper 81611	
Committee  Non-Committee	7. Purpose of Expenditure: STENCICS	
L_I Non-Committee	Check box if Electioneering Communication	
1. Date Expended	4. Name: Mother Cold Mercantile	
2. Amount	5. Address: 32046 JACK GREdIG LANC	
\$ 7.3,00 3.Recipient is (optional):	6. City/State/Zip: ASpen (0 8161)	
Committee	7. Purpose of Expenditure: WOOD FOR SIGNS	
Non-Committee	Check box if Electioneering Communication	
1. Date Expended	4. Name:	
2. Amount	5. Address: 23250 TWO RIVERS Rd.	
\$ 2,67 3.Recipient is (optional):	6. City/State/Zip: BASACT 8162/	
Committee	7. Purpose of Expenditure: TADE	
☐ Non-Committee	Check box if Electioneering Communication	
1. Date Expended		
6ct.25	5. Address: 23250 TWO RIVERS Rd.	
2. Amount		
3. Recipient is (optional):	6. City/State/Zip: BASACT 81621	
Committee  Non-Committee	7. Purpose of Expenditure: OFFICE SUPPLIES - PAPER	
The state of the s	check box if Electioneering Communication	
1. Date Expended	4. Name: Jean Ower	
2. Amount	5. Address: 151 QUENT LANE	
\$ 3.Recipient is (optional):	6. City/State/Zip: CARBONDACE, CO 81623	
Committee  Non-Committee	7. Purpose of Expenditure: Design For Flyer Layout	
La ivon-committee	Check box if Electioneering Communication	

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Schedule B – Itemized Expenditures Statement (\$20 or more)		
Full Name of Committee/Person: Vote FOR TON?		
PLEASE PRINT/TYPE		
1. Date Expended	4. Name: OCD SNOWMSS MARKET	
2. Amount	5. Address: 26800 Hwy, 82	
\$ 3, \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	6. City/State/Zip: SNOWMSS, CO 81654	
Committee	7. Purpose of Expenditure: TAPC	
☐ Non-Committee	Check box if Electioneering Communication	
1. Date Expended	4. Name: CheAp postCARDS/48 hR print	
2. Amount	5. Address: https://www.signsonthecheap.com	
\$ 192.5 \ 3.Recipient is (optional):	6. City/State/Zip: INTENNET	
Committee	7. Purpose of Expenditure: <u>POSTCARDS</u> FOR FRONT DOORS	
LJ Non-Committee	Check box if Electioneering Communication	
1. Date Expended	4. Name:	
2. Amount	5. Address:	
\$ 3.Recipient is (optional):	6. City/State/Zip:	
Committee	7. Purpose of Expenditure:	
☐ Non-Committee	☐ Check box if Electioneering Communication	
1. Date Expended	4. Name:	
2. Amount	5. Address:	
\$ 3.Recipient is (optional):	6. City/State/Zip:	
Committee	7. Purpose of Expenditure:	
Non-Committee	☐ Check box if Electioneering Communication	
1. <u>Date Expended</u>	4. Name:	
2. Amount	5. Address:	
\$ 3.Recipient is (optional):	6. City/State/Zip:	
Committee	7. Purpose of Expenditure:	
Non-Committee	☐ Check box if Electioneering Communication	
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