

Pitkin County Clerk and Recorder
 501 E Hyman Ave., STE 101
 Aspen, Colorado 81611
 Phone: (970) 429-2732
 Fax: (970) 445-3007
 eFile address: elections@pitkincounty.com
 Website: www.pitkinvotes.com



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RECEIVED
 JUN 01 2022
 PITKIN COUNTY CLERK

CLERK AND RECORDER

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Candidate: JOE D. SALVO

As Shown On Pitkin County Committee Registration

Address of Committee/Candidate: 500 W BLEEKER ST

City, State & Zip Code: ASPEN CO 81611

Committee Type:

Name and Address of Financial Institution: ALPINE BANK 600 E HOPKINS ASPEN CO

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: 01-01-22 Through 06-02-22
Date Date

Declared Total Spending (if applicable) \$12,158.09
[Art. XXVIII, Sec. 4(1)]

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ <u>0</u>
2	Total Monetary Contributions (line 11)	\$ <u>30,957.77</u>
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ <u>30,957.77</u>
4	Total Monetary Expenditures (line 19)	\$ <u>12,158.09</u>
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ <u>18,799.68</u>

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: Joe DiSalvo

Candidate's Signature: [Signature] Date: 6/1/22

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 JUN 01 2022
 PITKIN COUNTY CLERK

CLERK AND RECORDER

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Candidate:	JOSEPH DISALVO
Address of Committee/Candidate: City, State & Zip Code:	As Shown On Pitkin County Committee Registration 500 W. BLEEKER ST. ASPEN, CO 81611
Committee Type:	
Name and Address of Financial Institution	ALPINE BANK, 600 E HOPKINS ST, ASPEN

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: **3/14/2022** | Through | **6/02/2022**
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)	\$ 30,957.77
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 30,957.77
4 Total Monetary Expenditures (line 19)	\$ 12,158.09
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 18,799.68

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: **VALERIE RYAN**
 Registered Agent's Signature: Valerie Ryan Date: 6/2/2022
 Print Candidate Name: **JOSEPH DISALVO**
 Candidates Signature: _____ Date: _____

Full Name of Committee/Candidate: JOSEPH DISALVO

Current Reporting Period: 3/14/2022 Through 6/02/2022

Funds on hand at the beginning of reporting period (Monetary Only)		\$
6	Itemized Contributions of \$20 or More (C.F.R. 51-45-108(a)(4), H.R.C. 55.8A) (Please list on Schedule "A")	\$ 30,950.00
7	Total of Non-Itemized Contributions (Individual Contributions of \$19.99 and Less)	\$ 7.77
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 "U")	\$
11	Total Monetary Contributions (Total of Lines 6 through 10)	\$ 30,957.77
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$
13	Total Contributions (Line 11 + Line 12)	\$ 30,957.77
14	Itemized Expenditures \$20 or More (C.F.R. 51-45-108(a)(4), H.R.C. 55.8A) (Please list on Schedule "B")	\$ 12,158.09
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$
16	Loan Repayments Made (Please list on Schedule "C")	\$
17	Returned Contributions (to donor) (Please list on Schedule "U")	\$
18	Total Expenditure by third party controlled by or coordinated with a candidate, candidate committee or political party. (Statement of Non Monetary Contributor form)	\$
19	Total Monetary Expenditures (Total of Lines 14 through 17)	12,158.09
20	Total Spending (Line 19 + line 18)	\$ 12,158.09

Schedule B – Itemized Expenditures Statement (\$20 or more)
11-45-10R11(a) CRS 1

Full Name of Committee/Person: JOSEPH DISALVO

PLEASE PRINT/TYPE

1. Date Expended 3/3/2022	4. Name: GODADDY
2. Amount \$ 28.57	5. Address: 2155 E. GoDaddy Way
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: Tempe, AZ 85284
	7. Purpose of Expenditure: WEBSITE
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended 3/3/2022	4. Name: GODADDY
2. Amount \$ 50.06	5. Address: 2155 E. GoDaddy Way
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: Tempe, AZ 85284
	7. Purpose of Expenditure: WEBSITE
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended 3/10/2022	4. Name: GODADDY
2. Amount \$ 83.88	5. Address: 2155 E. GoDaddy Way
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: Tempe, AZ 85284
	7. Purpose of Expenditure: WEBSITE
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended 3/10/2022	4. Name: GODADDY
2. Amount \$ 219.98	5. Address: 2155 E. GoDaddy Way
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: Tempe, AZ 85284
	7. Purpose of Expenditure: WEBSITE
	<input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended 3/23/2022	4. Name: CANVA
2. Amount \$ 55.00	5. Address: 75 East Santa Clara Street
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: San Jose, CA 95113
	7. Purpose of Expenditure: CARDS
	<input type="checkbox"/> Check box if Electioneering Communication

Schedule B – Itemized Expenditures Statement (\$20 or more)
11-45-16(8/17a) CRS 1

Full Name of Committee/Person: JOSEPH DISALVO

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 4/5/2022	4. Name: GRID IRON TOURNAMENT
2. <u>Amount</u> \$ 1500	5. Address: 1000 TRUSCOTT PLACE
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: ASPEN, CO 81611
	7. Purpose of Expenditure: SPONSORSHIP
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 3/30/2022	4. Name: VALERIE RYAN
2. <u>Amount</u> \$ 2600	5. Address: P.O. BOX 5625
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: DENVER, CO 80217
	7. Purpose of Expenditure: MARCH FEE
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 4/12/2022	4. Name: LAPEL PIN NOW
2. <u>Amount</u> \$ 600.28	5. Address: 12701 Executive Dr, Ste 604B
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: Stafford, TX 77477
	7. Purpose of Expenditure: LAPEL PINS
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 5/19/2022	4. Name: VALERIE RYAN
2. <u>Amount</u> \$ 2600	5. Address: P.O. BOX 5625
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: DENVER, CO 80217
	7. Purpose of Expenditure: APRIL FEE
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 6/2/2022	4. Name: ASPEN TIMES
2. <u>Amount</u> \$ 4420.32	5. Address: 314 E. Hyman Ave. #101
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: ASPEN, CO 81611
	7. Purpose of Expenditure: ADVERTISING
	<input type="checkbox"/> Check box if Electioneering Communication

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

F C R S 81-45-108(1)(a) HRC 8 6 6 41

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>GOLDSMITH, ADAM</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>289 EXHIBITION LN</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>REAL ESTATE ASSOCIATE</u>

1. <u>Date Accepted</u> 03/14/2020	4. Name (Last, First): <u>MEAGER, JIMMY</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>310 LACET CT</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>FRANKEL, GREGG</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>37 WATER ST</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>LEBANON, NJ, 08833</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESS OWNER</u>

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>MOONEY, TIM</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>PO Box 8931</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>REAL ESTATE ASSOCIATE</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 5 6.6.2; Political Committee Supporting or Opposing Pitkin County Candidate(s) – HRC 5 6.6.2.

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

I.C.R.S. 81-45-108(1)(a) HRC 8.6.6.41

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>LEWIS, MELONY</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>100 E. FRANCIS ST</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESS OWNER</u>

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>LEWIS, ADAM</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>100 E. FRANCIS ST</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESS OWNER</u>

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>MURPHY, MARK</u>
2. <u>Contribution Amt.</u> \$ <u>250.00</u>	5. Address: <u>176 TOWERING MOON LN</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>PUNTA GORDA, NY, 11980</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>KMS INDUSTRIES, PRESIDENT</u>

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>MCKNIGHT, SPENCER</u>
2. <u>Contribution Amt.</u> \$ <u>50.00</u>	5. Address: <u>403 PARK AVE #10</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>ASPEN DAILY NEWS, OWNER</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 A – Itemized Contributions Statement (\$20 or more)

ICRS 61-45-108(1)(a) HRC 66641

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 03/15/2022	4. Name (Last, First): <u>KORIOTH, JOHN</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>2305 BARTON CREEK BLVD #34</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>AUSTIN, TX 78735</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BAR OWNER</u>

1. <u>Date Accepted</u> 03/15/2022	4. Name (Last, First): <u>SASLOVE, JOSHUA</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>520 E. DURANT AVE</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>REAL ESTATE ASSOCIATE</u>

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>ROGERS, OLIVIA</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>9806 INWOOD ROAD</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>DALLAS, TX, 75220</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>ACCOUNT EXECUTIVE</u>

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>ROGERS, NANCY</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>9806 INWOOD ROAD</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>DALLAS, TX, 75220</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESS OWNER</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 A – Itemized Contributions Statement (\$20 or more)

I.C.R.S. 61-45-108(1)(a) · HRC 6.6.6.1

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>ROGERS, RICHARD</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>9806 INWOOD ROAD</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>DALLAS, TX, 75220</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESS OWNER</u>

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>ROGERS, RICK</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>5247 SPANISH OAKS</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>FRISCO, TX, 75034</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESS OWNER</u>

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>ROGERS, MELODY</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>5247 SPANISH OAKS</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>FRISCO, TX, 75034</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>HOMEMAKER</u>

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>ROGERS, RICHARD III</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>5247 SPANISH OAKS</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>FRISCO, TX, 75034</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>STUDENT</u>

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

[C.R.S. 61-45-108(1)(a); HRC 6.6.6.1]

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>ROGERS, MARIAH</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>5247 SPANISH OAKS</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>FRISCO, TX, 75034</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>STUDENT</u>

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>ROGERS, MARISSA</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>5247 SPANISH OAKS</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>FRISCO, TX, 75034</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>STUDENT</u>

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>ROGERS, RENEE</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>5247 SPANISH OAKS</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>FRISCO, TX, 75034</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>STUDENT</u>

1. <u>Date Accepted</u> 03/14/2022	4. Name (Last, First): <u>KRIEGER, JOYCE</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>7232 PRESTON ROAD</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>DENISON, TX, 75020</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</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. 61-45-108(1)(a) HRC 66641

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 03/15/2022	4. Name (Last, First): <u>FRISCH, ADAM</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>1350 MOUNTAIN VIEW DR.</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>POLITICIAN</u>

1. <u>Date Accepted</u> 03/15/2022	4. Name (Last, First): <u>BRENER, GABRIEL</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>611E. HOPKINS AVE</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESS OWNER</u>

1. <u>Date Accepted</u> 03/15/2022	4. Name (Last, First): <u>BRENER, DEBORAH</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>611E. HOPKINS AVE</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>HOMEMAKER</u>

1. <u>Date Accepted</u> 03/15/2022	4. Name (Last, First): <u>DRAFT, HOWARD</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>800 SOUTH POINT DR. APT 1404</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>MIAMI BEACH, FL, 33139</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESS OWNER</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 A – Itemized Contributions Statement (\$20 or more)

(C.R.S. 61-45-108(1)(a); HRC 6.6.6.1)

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 03/15/2022	4. Name (Last, First): <u>DRAFT, CAROLINE</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>800 SOUTH POINT DR. APT 1404</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>MIAMI BEACH, FL, 33139</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>HOMEMAKER</u>

1. <u>Date Accepted</u> 03/15/2022	4. Name (Last, First): <u>ACKERLY, LELAND</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>5306 HOLLISTER ST</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>HOUSTON, TX, 77040</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESS OWNER</u>

1. <u>Date Accepted</u> 03/16/2022	4. Name (Last, First): <u>LARNER, JODI</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>980 CEMETERY LN</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESS OWNER</u>

1. <u>Date Accepted</u> 03/16/2022	4. Name (Last, First): <u>LEWIS, JONATHAN</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>3595 ANCHORAGE WAY</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COCONUT GROVE, FL, 33133</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESS OWNER</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 A – Itemized Contributions Statement (\$20 or more)

I.C.R.S. 61-45-108(1)(a) - HRC § 6.6.4

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 03/16/2022	4. Name (Last, First): ZITELLI, MARK
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: 414 N. 1st St
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: ASPEN, CO, 81611-1408
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): N/A
	9. Occupation (if applicable, <u>mandatory</u>): BUSINESS OWNER

1. <u>Date Accepted</u> 03/16/2022	4. Name (Last, First): AYERS, STEVE
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: 236 HOLLAND THOMPSON DR.
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: CARBONDALE, CO, 81623
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): N/A
	9. Occupation (if applicable, <u>mandatory</u>): DOCTOR

1. <u>Date Accepted</u> 03/16/2022	4. Name (Last, First): DILUCIA, ANTHONY
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: 520 E. DURANT AVE.
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: ASPEN, CO, 81611
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): N/A
	9. Occupation (if applicable, <u>mandatory</u>): BUSINESS OWNER

1. <u>Date Accepted</u> 03/16/2022	4. Name (Last, First): MOUNTAIN, CHAD
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: 2021 OCEAN AVE, Apt 103
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: SANTA MONICA, CA, 90405
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): N/A
	9. Occupation (if applicable, <u>mandatory</u>): ACTOR

* 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)

I.C.R.S. 51-45-108(1)(a) · HRC 5 6 6 41

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 03/17/2022	4. Name (Last, First): <u>ERNEMANN, ANDREW</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>415 E. HYMAN AVE</u>
3. <u>Aggregate Amt. *</u> \$ 500	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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Business Owner</u>

1. <u>Date Accepted</u> 03/19/2022	4. Name (Last, First): <u>FEDER, ERIC</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>4042 ISLAND ESTATES DR.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>MIAMI, FL, 33160</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Business Owner</u>

1. <u>Date Accepted</u> 03/19/2022	4. Name (Last, First): <u>FEDER, LIZ</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>4042 ISLAND ESTATES DR.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>MIAMI, FL, 33160</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Business Owner</u>

1. <u>Date Accepted</u> 03/22/2022	4. Name (Last, First): <u>JACOBSON, BOB</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>924 E COOPER AVE</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Business Owner</u>

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

I.C.R.S. 81-45-108(1)(a) HRC 86641

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 03/22/2022	4. Name (Last, First): <u>BRULAND, RAMONA</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>478 West Reds Rd.</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Producer/writer</u>

1. <u>Date Accepted</u> 03/24/2022	4. Name (Last, First): <u>DUBOEF, DENA</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>748 PILOT RD.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>LAS VEGAS, NV, 89119</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>HOUSE WIFE</u>

1. <u>Date Accepted</u> 03/25/2022	4. Name (Last, First): <u>DISAINO, PETRINA</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>84 PITKIN MESA DR</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>REAL ESTATE ASSOCIATE</u>

1. <u>Date Accepted</u> 03/25/2022	4. Name (Last, First): <u>ERSOFF, LISA</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>37 Spur Ridge Ln.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Snowmass Village, Co, 81615</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>House wife</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 A – Itemized Contributions Statement (\$20 or more)

I.C.R.S. 61-45-108(1)(a) HRC 6.6.6.1

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 03/25/2022	4. Name (Last, First): <u>ERSOFF, BRETT</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>37 Spur Lodge Ln</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>SNOWMASS VILLAGE, CO, 81615</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Business Owner</u>

1. <u>Date Accepted</u> 03/28/2022	4. Name (Last, First): <u>HIEB, KENNETH</u>
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: <u>678 FORTE BLVD</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>FRANKLIN SQUARE, NY, 11010</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>INVESTIGATIVE SPECIALIST</u>

1. <u>Date Accepted</u> 03/30/2022	4. Name (Last, First): <u>BOEROR, KIMBERLY</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>845 N HIGH STREET UNIT 505</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLUMBUS, OH, 43215</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Housewife</u>

1. <u>Date Accepted</u> 03/30/2022	4. Name (Last, First): <u>BOEROR, DOUGLAS</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>845 N HIGH STREET UNIT 505</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLUMBUS, OH, 43215</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Business Owner</u>

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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: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 03/29/2022	4. Name (Last, First): <u>HARRIS, DAVID</u>
2. <u>Contribution Amt.</u> \$ <u>50.00</u>	5. Address: <u>415 E HYMAN AVE</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Real Estate Associate</u>

1. <u>Date Accepted</u> 03/30/2022	4. Name (Last, First): <u>SALLA, JOHN</u>
2. <u>Contribution Amt.</u> \$ <u>100.00</u>	5. Address: <u>71 MEADOWS TRUSTEE RD</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Real Estate Associate</u>

1. <u>Date Accepted</u> 03/30/2022	4. Name (Last, First): <u>MANCARI, BOB</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>232 DESERT VIEW ST</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>LAS VEGAS, NV, 89107</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>CASINO EXECUTIVE</u>

1. <u>Date Accepted</u> 04/01/2022	4. Name (Last, First): <u>HAWN, GIOLOIE</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>21731 VENTURA BLVD #300</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>WOODLAND HILLS, CA, 91364</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Actor</u>

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

[C.R.S. 81-45-108(1)(a); HRC 6664]

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 04/01/2022	4. Name (Last, First): <u>RUSSELL, KURT</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>21731 VENTURA BLVD #300</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>WOODLAND HILLS, CA, 91364</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Actor</u>

1. <u>Date Accepted</u> 04/01/2022	4. Name (Last, First): <u>HUDSON, OLIVER</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>21731 VENTURA BLVD #300</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>WOODLAND HILLS, CA, 91364</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Actor</u>

1. <u>Date Accepted</u> 04/01/2022	4. Name (Last, First): <u>HUDSON, ERINN</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>21731 VENTURA BLVD #300</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>WOODLAND HILLS, CA, 91364</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Housewife</u>

1. <u>Date Accepted</u> 04/01/2022	4. Name (Last, First): <u>RUSSELL, BOSTON</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>21731 VENTURA BLVD #300</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>WOODLAND HILLS, CA, 91364</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>FILM PRODUCTION</u>

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

I.C.R.S. 61-45-108(1)(a); HRC 6.6.6.1

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 04/01/2022	4. Name (Last, First): HUDSON, KATE
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: 21731 VENTURA BLVD #300
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: WOODLAND HILLS, CA, 91364
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): N/A
	9. Occupation (if applicable, <u>mandatory</u>): ACTOR

1. <u>Date Accepted</u> 04/01/2022	4. Name (Last, First): WILLIE FUJIKAWA, DANNY
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: 21731 VENTURA BLVD #300
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: WOODLAND HILLS, CA, 91364
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): N/A
	9. Occupation (if applicable, <u>mandatory</u>): MUSICIAN

1. <u>Date Accepted</u> 04/01/2022	4. Name (Last, First): RUSSELL, WYATT
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: 21731 VENTURA BLVD #300
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: Woodland Hills, CA, 91364
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): N/A
	9. Occupation (if applicable, <u>mandatory</u>): Actor

1. <u>Date Accepted</u> 04/01/2022	4. Name (Last, First): Hagner, Meredith
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: 21731 Ventura Blvd #300
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: Woodland Hills, CA, 91364
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): N/A
	9. Occupation (if applicable, <u>mandatory</u>): Actor

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

I.C.R.S. 61-45-108(1)(a), H.R.C. 6.6.41

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 04/01/2022	4. Name (Last, First): <u>LLOYD, KRISTI</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>21731 VENTURA BLVD #300</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Woodland Hills, CA, 91364</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Financial Manager</u>

1. <u>Date Accepted</u> 04/01/2022	4. Name (Last, First): <u>Flynn, Amanda & JR</u>
2. <u>Contribution Amt.</u> \$ <u>100.00</u>	5. Address: <u>208 Cottonwood Lane</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Business Owner</u>

1. <u>Date Accepted</u> 04/04/2022	4. Name (Last, First): <u>KLANDERUD, ERIK</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>PO Box 1558</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>N/A</u>

1. <u>Date Accepted</u> 04/04/2022	4. Name (Last, First): <u>MACKAY, PAMELA</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>1020 WATERS AVE #2</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>LAWYER</u>

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

I.C.R.S. 81-45-108(1)(a); H.R.C. 5 6 6 41

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 04/04/2022	4. Name (Last, First): <u>MACKAY, CRAIG</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>1020 WATERS Ave #2</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>RETIRED</u>

1. <u>Date Accepted</u> 04/05/2022	4. Name (Last, First): <u>ZILKHA, NAT</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>3801 McIn FLATS RD</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Business Owner</u>

1. <u>Date Accepted</u> 04/05/2021	4. Name (Last, First): <u>ZILKHA, SARA</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>3801 McIn FLATS RD, Aspen</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>House wife</u>

1. <u>Date Accepted</u> 04/03/2022	4. Name (Last, First): <u>FELLMAN, TOM</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>809 N 96TH ST</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>OMAHA, NE, 68114</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Business Owner</u>

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

[C.R.S. 81-45-108(1)(a) - HRC 5.6.6.4]

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 04/12/2022	4. Name (Last, First): <u>COHEN, JOEL</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>6917 VALENCIA DR.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>MIAMI BEACH, FL, 33109</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

1. <u>Date Accepted</u> 04/12/2022	4. Name (Last, First): <u>COHEN, RHA</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>6917 VALENCIA DR</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>MIAMI BEACH, FL, 33109</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

1. <u>Date Accepted</u> 04/09/2022	4. Name (Last, First): <u>LILLIE, JIM</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>PO BOX 4418,</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ASPER, CO, 81612</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>VICE CHAIRMAN</u>

1. <u>Date Accepted</u> 04/09/2022	4. Name (Last, First): <u>LILLIE, LISA</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>PO BOX 4418</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ASPER, CO, 81612</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>House wife</u>

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

I.C.R.S. 81-45-108(1)(a); H.R.C. 6.6.6.1

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 04/10/2022	4. Name (Last, First): THOMPSON, Scott
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: 1107 KINGS Row
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: CARBONDALE, Co, 81623
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): N/A
	9. Occupation (if applicable, <u>mandatory</u>): Fire Chief

1. <u>Date Accepted</u> 04/12/2022	4. Name (Last, First): WARDY, Sofia
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: PO Box 650
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: WOODY CREEK, Co, 81656
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): N/A
	9. Occupation (if applicable, <u>mandatory</u>): Real Estate Associate

1. <u>Date Accepted</u> 04/12/2022	4. Name (Last, First): KISSANE VIOLA, KATIE
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: 31 Lower Bullwinkle
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: Aspen, Co, 81611
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): N/A
	9. Occupation (if applicable, <u>mandatory</u>): Creative Director

1. <u>Date Accepted</u> 04/27/2022	4. Name (Last, First): NAKFOOR, Bruce
2. <u>Contribution Amt.</u> \$ 250.00	5. Address: 1705 Lakeshore Dr.
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: Austin, Tx, 78746
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): N/A
	9. Occupation (if applicable, <u>mandatory</u>): Real Estate Associate

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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: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 05/16/2022	4. Name (Last, First): <u>Allan, Cameron</u>
2. <u>Contribution Amt.</u> \$ 300.00	5. Address: _____
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Aspen, Co</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Chief of staff</u>

1. <u>Date Accepted</u> 05/16/2022	4. Name (Last, First): <u>Allan, Andrew & LORA</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>320 W Hopkins Ave</u>
3. <u>Aggregate Amt. *</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>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>N/A</u>

1. <u>Date Accepted</u> 05/18/2022	4. Name (Last, First): <u>BIGGE, JESSICA</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>4 Fox Run Rd</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Upton, MA, 01568</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>N/A</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>): _____

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Pitkin County Clerk and Recorder
501 E Hyman Ave., STE 101
Aspen, Colorado 81611
Phone: (970) 429-2732
Fax: (970) 445-3007
eFile address: elections@pitkincounty.com
Website: www.pitkinvotes.com

PITKIN COUNTY

space below for office use only
RECEIVED
JUN 01 2022
PITKIN COUNTY CLERK

CLERK AND RECORDER

CANDIDATE STATEMENT OF NON-RECEIPT OF CONTRIBUTIONS AND NON-EXPENDITURE OF FUNDS

This form is recommended but not required.
This form is for use by candidates that do not have a campaign committee and have not received contributions.
No expenditures have been made on behalf of the candidate.

Office & District

Office: SHERIFF District (if applicable): _____

Candidate Information

Candidate Name: JOE D. SALVO
Residence Street Address: 500 W BLEEYER ST Apt/Unit: _____
Residence Address City: ASPEN State: CO Zip Code: 81611

Reporting Period: Beginning Date: 01/01/22 Ending Date: 06/02/22

CONTRIBUTIONS RECEIVED OR RECEIVABLE DURING THIS REPORTING PERIOD

\$0.00

EXPENDITURES MADE OR INCURRED DURING THIS REPORTING PERIOD

\$0.00

I, JOE D. SALVO, affirm that no person received contributions on my behalf nor made expenditures on my behalf. No contributions have been pledged to me nor on my behalf. I have not received any contributions nor have I made or incurred any expenditures on my own behalf during this election period.

[Signature]
Signature of Candidate

6-1-22
Date of Signing