

Recd 12-3-15

Colorado Secretary of State
Elections Division
1700 Broadway, Ste. 200
Denver, CO 80290
Ph: (303) 894-2200 ext. 6383
Fax: (303) 869-4861
Email: cphelp@sos.state.co.us
www.sos.state.co.us



Space Below For Office Use Only

REPORT OF CONTRIBUTIONS AND EXPENDITURES (1-45-108, C.R.S.)

Full Name of Committee/Person:	Committee to Elect Maria Gonzalez
Address of Committee/Person:	7311 Magnolia St
City, State & Zip Code:	Commerce City, CO 80022
Committee Type:	Candidate Committee
Name and Address of Financial Institution	Key Bank, 6565 E 72nd Ave, Commerce City, CO 80022

SOS ID NUMBER (state and county committees):

Type of Report

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

Reporting Period Covered: Through
Date Date

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

	Totals Detailed Summary Page
1 Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 161.55
2 Total Monetary Contributions (line 11)	\$ 413.00
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 574.55
4 Total Monetary Expenditures (line 19)	\$ 492.00
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 82.55

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: Elizabeth True

Registered Agent's Signature: Elizabeth True Date: 12/3/2015

Print Candidate Name: Maria Gonzalez

Candidates Signature: Maria Gonzalez Date: 12/3/2015

Schedule A – Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: María Gonzalez

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/20/15</u>	4. Name (Last, First): <u>Diaz, Elvi's</u>
2. Contribution Amt. \$ <u>96.50</u>	5. Address: <u>P.O. Box 1796</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Commerce City, CO 80037</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Monetary Donation</u>
	8. Employer (if applicable, mandatory): <u>ESJ Trucking</u>
	9. Occupation (if applicable, mandatory): <u>Truck Driver</u>

1. Date Accepted <u>10/29/15</u>	4. Name (Last, First): <u>Herrera, Emilio</u>
2. Contribution Amt. \$ <u>96.50</u>	5. Address: <u>14574 Andrews Dr.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Denver, CO 80239</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Monetary Donation</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>retired</u>

1. Date Accepted <u>11/20/15</u>	4. Name (Last, First): <u>Alejandra Bonanda</u>
2. Contribution Amt. \$ <u>20.00</u>	5. Address: <u>15608 E. Mexico Ave</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Aurora, CO 80017</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>monetary donation</u>
	8. Employer (if applicable, mandatory): <u>Icon Lasic</u>
	9. Occupation (if applicable, mandatory): <u>Marketing</u>

1. Date Accepted <u>11/20/15</u>	4. Name (Last, First): <u>Laura Morales</u>
2. Contribution Amt. \$ <u>150.00</u>	5. Address: <u>16132 W. 63rd Ln. unit c</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Avada, CO 80403</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>monetary donation</u>
	8. Employer (if applicable, mandatory): <u>First Bank</u>
	9. Occupation (if applicable, mandatory): <u>Banker</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: María Gonzalez

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

PLEASE PRINT/TYPER

1. <u>Date Accepted</u> <u>11-20-15</u>	4. Name (Last, First): <u>Agnes Talumantes</u>
2. <u>Contribution Amt.</u> \$ <u>50.00</u>	5. Address: <u>13902 E. Marina Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Aurora CO 80011</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Monetary Donation</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Arriba Mi Negocio</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Self Employed</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).

DETAILED SUMMARY

Full Name of Committee/Person: Committee to Elect Maria Gonzalez

Current Reporting Period: 10/25/2015 Through 11/28/2015

Funds on hand at the beginning of reporting period (Monetary Only)		\$ 161.55
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 413.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 0.00
8	Loans Received (Please list on Schedule "C")	\$ 0.00
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ 0.00
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ 0.00
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 413.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 0.00
13	Total Contributions (Line 11 + line 12)	\$ 413.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 487.00
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 5.00
16	Loan Repayments Made (Please list on Schedule "C")	\$ 0.00
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ 0.00
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ 0.00
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 492.00
20	Total Spending (Line 18 + line 19)	\$ 492.00

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

Full Name of Committee/Person: Committee to Elect Maria Gonzalez

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>11/2/15</u>	4. Name: <u>FaceBook.com</u>
2. <u>Amount</u> <u>\$ 30.26</u>	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>CA</u>
	7. Purpose of Expenditure: <u>Online Marketing</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>11/4/15</u>	4. Name: <u>Sam's Club</u>
2. <u>Amount</u> <u>\$ 106.74</u>	5. Address: <u>7805 E. 35th Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver, CO 80238</u>
	7. Purpose of Expenditure: <u>Election night refreshments</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>11/25/15</u>	4. Name: <u>Image Impressions</u>
2. <u>Amount</u> <u>\$ 350.00</u>	5. Address: <u>6805 Broadway</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver, CO 80221</u>
	7. Purpose of Expenditure: <u>Marketing</u>
	<input type="checkbox"/> Check box if Electioneering Communication

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