



Space Below For Office Use Only

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

Full Name of Committee/Person: Rivera 4 Mayor committee / Hunter Rivera
Address of Committee/Person: 1157 Hemlock Dr
City, State & Zip Code: Windsor, Colorado, 80550
Committee Type: Candidate committee
Name and Address of Financial Institution: Bank of Colorado, 1041 Main St, Windsor, CO 80550

SOS ID NUMBER (state and county committees):

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: 09/12/2019 Through 03/17/2020

Declared Total Spending (if applicable) \$

Table with 5 rows: Funds on Hand at the Beginning of Reporting Period, Total Monetary Contributions, Total of Monetary Contributions & Beginning Amount, Total Monetary Expenditures, Funds on Hand at the End of Reporting Period.

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: Roberta Rivera
Registered Agent's Signature: Roberta Rivera Date: 03/17/2020
Print Candidate Name: Hunter Rivera
Candidates Signature: Hunter Rivera Date: 03/17/2020

DETAILED SUMMARY

Full Name of Committee/Person: Riverwalk mayor committee / Hunter Rivera

Current Reporting Period: 09/12/2019 Through 03/17/2020

	<b>Funds on hand at the beginning of reporting period</b> (Monetary Only)	\$ 0.00
6	<b>Itemized Contributions \$20 or More</b> [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 1,155.68
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$ 116.77
8	<b>Loans Received</b> (Please list on Schedule "C")	\$ 0.00
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$ 0.00
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$ 0.00
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$ 1,272.45
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$ 0.00
13	<b>Total Contributions</b> (Line 11 + line 12)	\$ 1,272.45
14	<b>Itemized Expenditures \$20 or More</b> [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 1,030.94
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$ 1.00
16	<b>Loan Repayments Made</b> (Please list on Schedule "C")	\$ 0.00
17	<b>Returned Contributions (To donor)</b> (Please list on Schedule "D")	\$ 0.00
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$ 0.00
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$ 1,031.94
20	<b>Total Spending</b> (Line 18 + line 19)	\$ 1,031.94

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

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

**Full Name of Committee/Person:** Rivera Mayor Committee/Hunter Rivera

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

**PLEASE PRINT/TYPE**

1. <u>Date Accepted</u> 09/12/19	4. Name (Last, First): <u>Rivera, Roberto</u>
2. <u>Contribution Amt.</u> \$ 60.00	5. Address: <u>1157 Hemlock Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Windsor, Colorado, 80550</u>
<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> 09/25/19	4. Name (Last, First): <u>Hammstreet, Jurret</u>
2. <u>Contribution Amt.</u> \$ 96.77	5. Address: <u>4954 <del>E</del> East E Evans Drive</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Scottsdale, AZ, 85254</u>
<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> 10/08/19	4. Name (Last, First): <u>Marcott, Julianne</u>
2. <u>Contribution Amt.</u> \$ 48.22	5. Address: <u>615 Chestnut St. Apt. 20</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Windsor, Colorado, 80550</u>
<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> 10/21/19	4. Name (Last, First): <u>Rivera, Brian</u>
2. <u>Contribution Amt.</u> \$ 400.00	5. Address: <u>2135, Lords Landing</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Virginia Beach, Virginia, 23454</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u> ): <u>United States Navy</u>
	9. Occupation (if applicable, <u>mandatory</u> ): <u>Military</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: Rivera Mayor Committee/Hunter Rivera

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/21/19</u>	4. Name (Last, First): <u>Smith, Wayne</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>3101 Basin Rd.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Virginia Beach, Virginia, 23451</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>01/24/2020</u>	4. Name (Last, First): <u>Speed, Karen</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>8310 Cherry Blossom Drive</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Windsor, Colorado, 80550</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>02/12/2020</u>	4. Name (Last, First): <u><del>Andrew Adams</del> Adams, Andrew</u>
2. Contribution Amt. \$ <u>280.69</u>	5. Address: <u>5803 29th St</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Greeley, Colorado, 80634</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>CSI Compressco</u>
	9. Occupation (if applicable, mandatory): <u>Oil ; Gas</u>

1. Date Accepted <u>02/26/2020</u>	4. Name (Last, First): <u>S Bartmann, Sherry</u>
2. Contribution Amt. \$ <u>25.00</u>	5. Address: <u>34469 County Road 25</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Greeley, Colorado,</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

\* 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: Rivera Mayor Committee/Hunter Rivera

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>02/26/2020</u>	4. Name (Last, First): <u>Olivas, Lenina</u>
2. <u>Contribution Amt.</u> \$ <u>25.00</u>	5. Address: <u>1195 W 45th Street</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>LOVELAND, COLORADO, 80538</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. <u>Date Accepted</u> <u>02/26/2020</u>	4. Name (Last, First): <u>Van Beber, Jeff</u>
2. <u>Contribution Amt.</u> \$ <u>100.00</u>	5. Address: <u>12607 County Rd. 76</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Eaton, Colorado, 80615</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. <u>Date Accepted</u> <u>07/03/2020</u>	4. Name (Last, First): <u>Bisceglia, Darle</u>
2. <u>Contribution Amt.</u> \$ <u>20.00</u>	5. Address: <u>610 Pine mtn Ct.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Windsor, Colorado, 80550</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

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, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

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

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

**Full Name of Committee/Person:** Rivera Mayor Committee / Hunter Rivera

**PLEASE PRINT/TYPE**

1. <u>Date Expended</u> <u>01/03/2020</u>	4. Name: <u>GoDaddy.com</u>
2. <u>Amount</u> \$ <u>20.00</u>	5. Address: <u>14455 North Hayden Rd. Suite 219</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Scottsdale, Arizona, 85260</u>
	7. Purpose of Expenditure: <u>Website</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>02/03/2020</u>	4. Name: <u>GoDaddy.com</u>
2. <u>Amount</u> \$ <u>20.00</u>	5. Address: <u>14455 North Hayden Rd. Suite 219</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Scottsdale, Arizona, 85260</u>
	7. Purpose of Expenditure: <u>Website</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>02/26/2020</u>	4. Name: <u>Colorado Cherry Company</u>
2. <u>Amount</u> \$ <u>381.39</u>	5. Address: <u>2191 Covered bridge pkwy</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Windsor, Colorado, 80550</u>
	7. Purpose of Expenditure: <u>Campaign event + food + drink</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>03/03/2020</u>	4. Name: <u>GoDaddy.com</u>
2. <u>Amount</u> \$ <u>20.00</u>	5. Address: <u>14455 North Hayden Rd. Suite 219</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Scottsdale, Arizona, 85260</u>
	7. Purpose of Expenditure: <u>website</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

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

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

**Full Name of Committee/Person:** Rivera Mayor Committee / Hunter Rivera

**PLEASE PRINT/TYPE**

1. <u>Date Expended</u> 09/19/19	4. Name: <u>GoDaddy.com</u>
2. <u>Amount</u> \$ 38.17	5. Address: <u>14455 North Hayden Rd. Suite 219</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Scottsdale, Arizona, 85260</u>
	7. Purpose of Expenditure: <u>registering website &amp; 1st month of payment</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/23/19	4. Name: <u>Stickers on the Cheap.com</u>
2. <u>Amount</u> \$ 128.21	5. Address: <u>11525 A StoneHollow Dr.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Austin, Texas, 78758</u>
	7. Purpose of Expenditure: <u>Stickers</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/23/19	4. Name: <u>Signs on the Cheap.com</u>
2. <u>Amount</u> \$ 383.18	5. Address: <u>11525 A StoneHollow Dr.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Austin, Texas, 78758</u>
	7. Purpose of Expenditure: <u>Yard Signs</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11/04/19	4. Name: <u>GoDaddy.com</u>
2. <u>Amount</u> \$ 20.00	5. Address: <u>14455 North Hayden Rd. Suite 219</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Scottsdale, Arizona, 85260</u>
	7. Purpose of Expenditure: <u>Website</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 12/03/19	4. Name: <u>GoDaddy.com</u>
2. <u>Amount</u> \$ 20.00	5. Address: <u>14455 North Hayden Rd. Suite 219</u>
	6. City/State/Zip: <u>Scottsdale, Arizona, 85260</u>

Website

3. Recipient is (optional): 6. City/State/Zip:

Committee

Non-Committee

**Schedule C - Loans**

Check box if Electioneering Communication

Full Name of Committee/Person: Rivera 4 member Committee / Hunter Rivera

**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(c)] 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): N/A

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: Rivera 4 mayor committee/ Hunter Rivera

**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): <u>N/A</u>
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. Purpose: _____

**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): _____

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): _____

**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:** Rivera 4 mayor committee / Hunter Rivera

PLEASE PRINT/TYPE

1. <u>Date Provided</u>	4. Name (Last, First): <u>N/A</u>
2. <u>Fair Market Value</u> S	5. Address: _____
3. <u>Aggregate Amt.</u> S	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>AM</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> S	5. Address: _____
3. <u>Aggregate Amt.</u> S	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. *

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</u> S	5. Address: _____
3. <u>Aggregate Amt.</u> S	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."