



REPORT OF CONTRIBUTIONS AND EXPENDITURES

Article XXVIII of the Colorado Constitution and Tital 1, Article 45 of the Colorado Revised Statute (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, CO, 80550
Committee Type: candidate committee
Name and Address of Financial Institution: Bank of Colorado, 1041 main st. Windsor, CO, 80550

COMMITTEE ID NUMBER

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: 03/17/2020 Through 04/03/2020

Declared Total Spending (if applicable) \$

Table with 3 columns: Line Number, Description, and Amount. Totals Detailed Summary Page. Rows include Funds on Hand at the Beginning, Total Monetary Contributions, Total of Monetary Contributions & Beginning Amount, Total Monetary Expenditures, and 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: 4-7-2020
Print Candidate Name: Hunter Rivera
Candidates Signature: Hunter Rivera Date: 04/07/2020

DETAILED SUMMARY

Full Name of Committee/Person: Rivera 4 mayor committee / Hunter Rivera

Current Reporting Period: 03/17/2020 Through 04/03/2020

Funds on hand at the beginning of reporting period (Monetary Only)		\$ 240,51
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "A")	\$ 400,00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 0,00
8	Loans Received (From Schedule "C")	\$ 0,00
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ 0,00
10	Returned Expenditures (from recipient) (From Schedule "D")	\$ 0,00
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 400,00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 0,00
13	Total Contributions (Line 11 + line 12)	\$ 400,00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$ 20,00
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 3,72
16	Loan Repayments Made (From Schedule "C")	\$ 0,00
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ 0,00
18	Total Coordinated Non-Monetary (in-kind) Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ 0,00
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 23,72
20	Total Spending (Line 18 + line 19)	\$ 23,72

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

Full Name of Committee/Person:

Rivera 4 mayor committee / Hunter Rivera

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>03/17/2020</u>	4. Name (Last, First): <u>Speed, Karen</u>
2. <u>Contribution Amt.</u> \$ <u>200.00</u>	5. Address: <u>9310 Cherry blossom Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Windsor, CO, 80550</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

1. <u>Date Accepted</u> <u>03/17/2020</u>	4. Name (Last, First): <u>Gilbert, Therese</u>
2. <u>Contribution Amt.</u> \$ <u>100.00</u>	5. Address: <u>1715 14th Ave</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Greenwood, CO 80631</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Weld re-6 School District</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>educator</u>

1. <u>Date Accepted</u> <u>03/17/2020</u>	4. Name (Last, First): <u>Clevenger, Jane</u>
2. <u>Contribution Amt.</u> \$ <u>65.00</u>	5. Address: <u>5337 Fox Hollow Ct</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>LOVELAND, CO, 80537</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> <u>03/17/2020</u>	4. Name (Last, First): <u>Agan, Dale</u>
2. <u>Contribution Amt.</u> \$ <u>35.00</u>	5. Address: <u>5973 Woodcliffe Dr</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Windsor, CO, 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>): _____

* 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 4 mayor committee / Hunter Rivera

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 04/03/2020	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, AZ, 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

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

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