

Town of Timnath  
 4750 Signal Tree Drive  
 Timnath, CO 80547  
 Ph: (970) 224-3211  
 Fax: (970) 224-3218  
 mpeters@timnathgov.com



## REPORT OF CONTRIBUTIONS AND EXPENDITURES

<b>Full Name of Committee/Person:</b>	Timnath Forward
<small>As Shown On Registration</small>	
<b>Address of Committee/Person:</b>	6818 Spring Rain Rd.
<b>City, State &amp; Zip Code:</b>	Timnath, CO 80547
<b>Committee Type:</b>	
<b>Name and Address of Financial Institution</b>	Blue Federal Credit Union

### Type of Report

- Regularly Scheduled Filing.
  60 days before election
  15 days before election
  Annual Report  
 30 days before election
  30 days after Election

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)

**Reporting Period Covered:** 7 Feb 26 Date Through 6 March 28 Date

**Declared Total Spending (if applicable)** \$

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 88.79
2	Total Monetary Contributions (line 11)	\$ 25
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ <del>113.79</del> 113.79
4	Total Monetary Expenditures (line 19)	\$ 117.6
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ - 3.81

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.

**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: Mani Nakhi

Registered Agent's Signature:  Date: 6 Mar 2016

**DETAILED SUMMARY**

Full Name of Committee/Person: Timnath Forward

Current Reporting Period: 7 Feb 26 Through 6 Mar 26

	<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>	\$
6	<b>Itemized Contributions \$20 or More</b>	\$ 25
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$
8	<b>Loans Received</b>	\$
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$
10	<b>Returned Expenditures (from recipient)</b>	\$
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$ 25
12	<b>Total Non-Monetary Contributions</b>	\$
13	<b>Total Contributions</b> (Line 11 + line 12)	\$
14	<b>Itemized Expenditures \$20 or More</b>	\$ 83.77
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$ 33.83
16	<b>Loan Repayments Made</b>	\$
17	<b>Returned Contributions (To donor)</b>	\$
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$ 117.6
20	<b>Total Spending</b> (Line 18 + line 19)	\$ 117.6

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

**Full Name of Committee/Person:** Timnath forward

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>26 Feb 26</u>	4. Name: <u>Cofco</u>
2. <u>Amount</u> \$ <u>50.87</u>	5. Address: _____
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Timnath</u>
	7. Purpose of Expenditure: <u>Hosting Meel of Creek (crack &amp; bowls)</u>

1. <u>Date Expended</u> <u>\$27</u>	4. Name: <u>Facebook</u>
2. <u>Amount</u> \$ <u>27 Feb 26</u>	5. Address: <u>Ad center</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____

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: _____

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: _____

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: _____

**Itemized Contributions Statement (\$20 or more)**

**Full Name of Committee/Person:** Timnath Forward

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> Feb 20, 26	4. Name (Last, First): <u>Jeff Paquette</u>
2. <u>Contribution Amt.</u> \$ <u>25</u>	5. Address: <u>1660 Florissant St.</u>
3. <u>Aggregate Amt. *</u> \$ <u>25</u>	6. City/State/Zip: <u>Lowland, CO 80538</u>
	7. Description: <u>cash</u>
	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: _____
	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: _____
	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: _____
	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u> ): _____
	9. Occupation (if applicable, <u>mandatory</u> ): _____



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**STATEMENT OF PERSONAL EXPENDITURES BY A CANDIDATE**  
 (For use by a candidate who has not received any contributions, but has made expenditures of personal funds.)

Candidate's Name: Mau Nakli

Candidate's Address: 6818 Spring Rain Rd.

City, State, and Zip Code: Timnath, CO 80547

Office: \_\_\_\_\_ Phone No.: \_\_\_\_\_ Elec./Yr.: \_\_\_\_\_

Reporting Period: Beginning Date 7 Feb 26 Ending Date 6 Mar 26

1. <u>Date Expended</u> 7 Feb 19 Feb 6 Mar 27 Feb	3. Name: <u>Facebook</u>
2. <u>Amount</u> \$15 \$12 \$378 \$27	4. Address: _____
	5. City, State, Zip: _____
	6. Purpose of Expense: <u>Ad center</u>

1. <u>Date Expended</u> 26/2	3. Name: <u>Cosco / Superway</u>
2. <u>Amount</u> \$29.87	4. Address: _____
	5. City, State, Zip: _____
	6. Purpose of Expense: <u>Hosing Meeteetee Creek</u>

1. <u>Date Expended</u>	3. Name: _____
2. <u>Amount</u> \$	4. Address: _____
	5. City, State, Zip: _____
	6. Purpose of Expense: _____

I certify to the best of my knowledge this Statement of Expenditures is true and correct.

Candidate Signature:  Date: 6 Mar 26

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## REPORT OF CONTRIBUTIONS AND EXPENDITURES

<b>Full Name of Committee/Person:</b>	Luke Wagner for Timnath Town Council
<small>As Shown On Registration</small>	
<b>Address of Committee/Person:</b>	5833 Claret Street
<b>City, State &amp; Zip Code:</b>	Timnath, Colorado, 80547
<b>Committee Type:</b>	Candidate Committee
<b>Name and Address of Financial Institution</b>	Wells Fargo, 420 Montgomery Street, San Francisco, CA 94104

### Type of Report

- Regularly Scheduled Filing.  60 days before election  15 days before election  Annual Report  
 30 days before election  30 days after Election

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)

Reporting Period Covered:  Through   
Date Date

Declared Total Spending (if applicable)

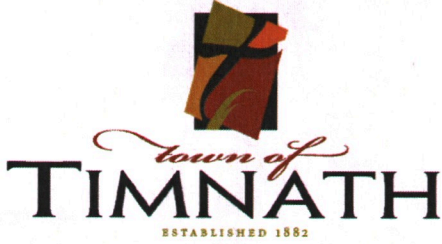
		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 542.97
2	Total Monetary Contributions (line 11)	\$ 2,450
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 2,992.97
4	Total Monetary Expenditures (line 19)	\$ 2,490.88
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 – line 4)	\$ 502.09

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.

**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: Luke Wagner

Registered Agent's Signature: Luke Wagner Date: 3/6/2026



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**STATEMENT OF PERSONAL EXPENDITURES BY A CANDIDATE**  
(For use by a candidate who has not received any contributions, but has made expenditures of personal funds.)

Candidate's Name: Luke Wagner

Candidate's Address: \_\_\_\_\_

City, State, and Zip Code: \_\_\_\_\_

Office: \_\_\_\_\_ Phone No.: \_\_\_\_\_ Elec./Yr.: \_\_\_\_\_

Reporting Period: Beginning Date \_\_\_\_\_ Ending Date \_\_\_\_\_

1. <u>Date Expended</u>	3. Name: <u>N/A</u>
2. <u>Amount</u> \$	4. Address: _____ 5. City, State, Zip: _____ 6. Purpose of Expense: _____

1. <u>Date Expended</u>	3. Name: _____
2. <u>Amount</u> \$	4. Address: _____ 5. City, State, Zip: _____ 6. Purpose of Expense: _____

1. <u>Date Expended</u>	3. Name: _____
2. <u>Amount</u> \$	4. Address: _____ 5. City, State, Zip: _____ 6. Purpose of Expense: _____

I certify to the best of my knowledge this Statement of Expenditures is true and correct.

Candidate Signature: Luke Wagner Date: 3/6/2026

**Itemized Contributions Statement (\$20 or more)**

**Full Name of Committee/Person:** Luke Wagner for Timnath Town Council

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 2/9/2026	4. Name (Last, First): <u>Sherri Wagner</u>
2. <u>Contribution Amt.</u> \$ 500	5. Address: <u>1137 Pheasant Drive</u>
3. <u>Aggregate Amt. *</u> \$ 1,000	6. City/State/Zip: <u>Fort Collins, CO 80525</u>
	7. Description: <u>Campaign Donation</u>
	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> 2/9/2026	4. Name (Last, First): <u>Carolyn Snyder</u>
2. <u>Contribution Amt.</u> \$ 1,250	5. Address: <u>4751 Pleasant Oak Drive, A35</u>
3. <u>Aggregate Amt. *</u> \$ 1,250	6. City/State/Zip: <u>Fort Collins, CO 80525</u>
	7. Description: <u>Campaign Donation</u>
	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> 2/9/2026	4. Name (Last, First): <u>Robert Axmacher</u>
2. <u>Contribution Amt.</u> \$ 500	5. Address: <u>6013 Story Road</u>
3. <u>Aggregate Amt. *</u> \$ 500	6. City/State/Zip: <u>Timnath, CO, 80547</u>
	7. Description: <u>Campaign Donation</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>Larimer County</u>
	9. Occupation (if applicable, <u>mandatory</u> ): <u>Chief Deputy District Attorney</u>

1. <u>Date Accepted</u> 2/17/2026	4. Name (Last, First): <u>Lorrie Martineau</u>
2. <u>Contribution Amt.</u> \$ 200	5. Address: <u>18956 East Low Place</u>
3. <u>Aggregate Amt. *</u> \$ 200	6. City/State/Zip: <u>Centennial, CO, 80015</u>
	7. Description: <u>Campaign Donation</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u> ): <u>Retired</u>

**DETAILED SUMMARY**Full Name of Committee/Person: Luke Wagner for Timnath Town CouncilCurrent Reporting Period: 2/7/2026Through 3/7/2026

	<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>	\$ 542.97
6	<b>Itemized Contributions \$20 or More</b>	\$ 2,450
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$ 0
8	<b>Loans Received</b>	\$ 0
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$ 0
10	<b>Returned Expenditures (from recipient)</b>	\$ 0
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$ 2,450
12	<b>Total Non-Monetary Contributions</b>	\$ 0
13	<b>Total Contributions</b> (Line 11 + line 12)	\$ 2,450
14	<b>Itemized Expenditures \$20 or More</b>	\$ 2,490.88
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$ 0
16	<b>Loan Repayments Made</b>	\$ 0
17	<b>Returned Contributions (To donor)</b>	\$ 0
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$ 0
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$ 2,490.88
20	<b>Total Spending</b> (Line 18 + line 19)	\$ 2,490.88

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

**Full Name of Committee/Person:** Luke Wagner for Timnath Town Council

**PLEASE PRINT/TYPE**

1. <u>Date Expended</u> 2/13/26	4. Name: <u>Meta</u>
2. <u>Amount</u> \$ 29.79	5. Address: <u>1 Facebook Way</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Menlo Park, CA 94025</u>
	7. Purpose of Expenditure: <u>Boost of Facebook Page</u>

1. <u>Date Expended</u> 2/17/2026	4. Name: <u>Enhanced Printing</u>
2. <u>Amount</u> \$ 2,266.17	5. Address: <u>1833 E Harmony Rd, Unit 8</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Fort Collins, CO 80525</u>
	7. Purpose of Expenditure: <u>Campaign Mailers</u>

1. <u>Date Expended</u> 2/20/2026	4. Name: <u>Enhanced Printing</u>
2. <u>Amount</u> \$ 121.84	5. Address: <u>1833 E Harmony Rd, Unit 8</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Fort Collins, CO 80525</u>
	7. Purpose of Expenditure: <u>Campaign Handouts</u>

1. <u>Date Expended</u> 3/2/2026	4. Name: <u>SquareSpace</u>
2. <u>Amount</u> \$ 36	5. Address: <u>225 Varick Street, 12th Floor</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>New York, New York, 10014</u>
	7. Purpose of Expenditure: <u>Website Domain</u>

1. <u>Date Expended</u> 3/3/2026	4. Name: <u>Town of Timnath</u>
2. <u>Amount</u> \$ 37.08	5. Address: <u>4750 Signal Tree Drive</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Timnath, CO 80547</u>
	7. Purpose of Expenditure: <u>Community Room Rental</u>

**Loans**

Full Name of Committee/Person: Luke Wagner for Timnath Town Council

**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.)

**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: \$ \_\_\_\_\_  
(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

Full Name of Committee/Person: Luke Wagner for Timnath Town Council

## Returned Contributions & Expenditures

### Returned Contributions

*(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

*(Expenditures returned or refunded to the committee)*

**PLEASE PRINT/TYPE**

1. <u>Date Expended</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. 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

**Full Name of Committee/Person:** Luke Wagner for Timnath Town Council

**PLEASE PRINT/TYPE**

1. <u>Date Provided</u>	4. Name (Last, First): <u>N/A</u>
2. <u>Fair Market Value</u> \$	5. Address: _____
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: _____
	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> \$	5. Address: _____
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: _____
	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> \$	5. Address: _____
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: _____
	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. *

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## REPORT OF CONTRIBUTIONS AND EXPENDITURES

<b>Full Name of Committee/Person:</b>	Dennis Strachota for Timnath Council Comm. Htee <small>As Shown On Registration</small>
<b>Address of Committee/Person:</b>	5051 Brule Dr.
<b>City, State &amp; Zip Code:</b>	Timnath CO 80547
<b>Committee Type:</b>	local elected official campaign
<b>Name and Address of Financial Institution</b>	ENT Credit Union, 4521 Weitzel St., Timnath CO

### Type of Report

- Regularly Scheduled Filing.  
  60 days before election  
  15 days before election  
  Annual Report  
 30 days before election  
  30 days after Election

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)

**Reporting Period Covered:** February 7, 2026 Date **Through** March 6, 2026 Date

**Declared Total Spending (if applicable)** \$

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 0
2	Total Monetary Contributions (line 11)	\$ 900.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 900.00
4	Total Monetary Expenditures (line 19)	\$ 802.59
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 – line 4)	\$ 97.41

**The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.**

**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: Dennis Strachota

Registered Agent's Signature: *Dennis Strachota* Date: 3/06/26

**DETAILED SUMMARY**Full Name of Committee/Person: Dennis Strachota for Timnath CouncilCurrent Reporting Period: February 7, 2026 Through March 6, 2026

	<b>Funds on hand at the beginning of reporting period</b> (Monetary Only)	\$ 0
6	<b>Itemized Contributions \$20 or More</b>	\$ 900
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$ 0
8	<b>Loans Received</b>	\$ 0
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$ 0
10	<b>Returned Expenditures (from recipient)</b>	\$ 0
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$ 900
12	<b>Total Non-Monetary Contributions</b>	\$ 225
13	<b>Total Contributions</b> (Line 11 + line 12)	\$ 1125
14	<b>Itemized Expenditures \$20 or More</b>	\$ 802.59
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$ 0
16	<b>Loan Repayments Made</b>	\$ 0
17	<b>Returned Contributions (To donor)</b>	\$ 0
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$ 225.00
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$ 802.59
20	<b>Total Spending</b> (Line 18 + line 19)	\$ 1027.59

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

**Full Name of Committee/Person:** Dennis Stvachota for Timnath Council

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 2/13/26	4. Name: <u>Staples Inc</u>
2. <u>Amount</u> \$ 23.82	5. Address: <u>4333 Corbett Dr.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Ft. Collins, CO</u>
	7. Purpose of Expenditure: <u>business cards</u>

1. <u>Date Expended</u> 2/17/26	4. Name: <u>Campaign Verify</u>
2. <u>Amount</u> \$ 95	5. Address: <u>1215 31st Street NW</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Washington, DC 20007-9998</u>
	7. Purpose of Expenditure: <u>candidate verification</u>

1. <u>Date Expended</u> 2/19/26	4. Name: <u>DRE Signs (signs.com)</u>
2. <u>Amount</u> \$ 658.57	5. Address: <u>28807 Freedom Dr.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Wixom, MI 48393</u>
	7. Purpose of Expenditure: <u>lawn signs</u>

1. <u>Date Expended</u> 2/23/26	4. Name: <u>Wix.com</u>
2. <u>Amount</u> \$ 25.20	5. Address: <u>100 Gansevoort St.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>New York NY 10014</u>
	7. Purpose of Expenditure: <u>website setup</u>

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: _____

## Itemized Contributions Statement (\$20 or more)

**Full Name of Committee/Person:** Dennis Strachota for Timnath Council

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>3/02/26</u>	4. Name (Last, First): <u>Sheski, John and Donaldson, Cathleen</u>
2. <u>Contribution Amt.</u> \$ <u>500</u>	5. Address: <u>1125 Hathaway Dr.</u>
3. <u>Aggregate Amt. *</u> \$ <u>500</u>	6. City/State/Zip: <u>Madison, WI 53711</u>
	7. Description: <u>monetary</u>
	8. Employer (if applicable, mandatory): <u>n.a.</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. <u>Date Accepted</u> <u>2/25/26</u>	4. Name (Last, First): <u>Wh. Hall, Steven</u>
2. <u>Contribution Amt.</u> \$ <u>100</u>	5. Address: <u>4025 Kern St.</u>
3. <u>Aggregate Amt. *</u> \$ <u>100</u>	6. City/State/Zip: <u>Timnath, CO 80547</u>
	7. Description: <u>monetary</u>
	8. Employer (if applicable, mandatory): <u>Self</u>
	9. Occupation (if applicable, mandatory): <u>Construction</u>

1. <u>Date Accepted</u> <u>2/27/26</u>	4. Name (Last, First): <u>Godfrey, Elizabeth</u>
2. <u>Contribution Amt.</u> \$ <u>50</u>	5. Address: <u>4403 Caramel St.</u>
3. <u>Aggregate Amt. *</u> \$ <u>50</u>	6. City/State/Zip: <u>Timnath, CO 80547</u>
	7. Description: <u>monetary</u>
	8. Employer (if applicable, mandatory): <u>n.a.</u>
	9. Occupation (if applicable, mandatory): <u>retired</u>

1. <u>Date Accepted</u> <u>3/05/26</u>	4. Name (Last, First): <u>Olive, Laura</u>
2. <u>Contribution Amt.</u> \$ <u>150</u>	5. Address: <u>5024 W. 5th Ave</u>
3. <u>Aggregate Amt. *</u> \$ <u>150</u>	6. City/State/Zip: <u>Timnath, CO 80547</u>
	7. Description: <u>monetary</u>
	8. Employer (if applicable, mandatory): <u>self</u>
	9. Occupation (if applicable, mandatory): <u>real estate broker</u>

**Itemized Contributions Statement (\$20 or more)**

**Full Name of Committee/Person:** Dennis Strachota for Timnath Council

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 3/05/26	4. Name (Last, First): <u>Cohn, Andrew</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>5000 3rd Ave.</u>
3. <u>Aggregate Amt. *</u> \$ 100	6. City/State/Zip: <u>Timnath, CO 80547</u>
	7. Description: <u>monetary</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>self</u>
	9. Occupation (if applicable, <u>mandatory</u> ): <u>Owner of Foco Food Trucks</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: _____
	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: _____
	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: _____
	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u> ): _____
	9. Occupation (if applicable, <u>mandatory</u> ): _____

## Statement of Non-Monetary Contributions

Full Name of Committee/Person: Dennis Strachota for Timnath Council

**PLEASE PRINT/TYPE**

1. <u>Date Provided</u>  3/05/26	4. Name (Last, First): <u>Fickler, Wade and Kurth, Brian</u>
2. <u>Fair Market Value</u> \$ <u>225</u>	5. Address: <u>4029 Kern Street</u>
3. <u>Aggregate Amt.</u> \$ <u>225</u>	6. City/State/Zip: <u>Timnath CO 80547</u>
	7. Description: <u>refreshments for meet and greet event</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>NCSL and self</u>
	9. Occupation (if applicable, <u>mandatory</u> ): <u>manager and consultant</u>
	10. <input checked="" 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> \$	5. Address: _____
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: _____
	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> \$	5. Address: _____
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: _____
	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. *