

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



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RECEIVED

OCT 17 2023

City Clerk's Office
 City of Westminster

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

Full Name of Committee/Person:	KAREN F. KALAVITY KAREN FOR WESTMINSTER
As Shown On Registration	
Address of Committee/Person:	9940 Westcliff Pkwy #1614
City, State & Zip Code:	Westminster, CO 80021
Committee Type:	Campaign
Name and Address of Financial Institution	Westerra, Arvada Colorado

SOS ID NUMBER (state and county committees):

[Empty box]

Type of Report

- Regularly Scheduled Filing.
- Amended Filing. This amends previous report filed on (date) [Empty box]
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

self-funded campaign

Reporting Period Covered:

2023 to [Empty box]
Date

Through

(Oct 12th funding) Reporting:
Oct 17, 2023
Date

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

\$ 749.71

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 1000
2	Total Monetary Contributions (line 11)	\$ N/A
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ N/A
4	Total Monetary Expenditures (line 19)	\$ 749.41
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 250.29

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: KAREN F. KALAVITY

Registered Agent's Signature: Karen F. Kalavity Date: Oct 17, 2023

Print Candidate Name: KAREN F. KALAVITY

Candidates Signature: Karen F. Kalavity Date: Oct 17, 2023

DETAILED SUMMARY

Full Name of Committee/Person: KAREN F. KALAVITY : KAREN FOR WESTMINSTER

Current Reporting Period: 2023 Through Oct 17, 2023

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	<u>1000</u>
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	<u>N/A</u>
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	<u>N/A</u>
8	Loans Received (Please list on Schedule "C")	\$	<u>N/A</u>
9	Total of Other Receipts (Interest, Dividends, etc.)	\$	<u>N/A</u>
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$	<u>N/A</u>
11	Total Monetary Contributions (Total of lines 6 through 10)	\$	<u>N/A</u>
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	<u>N/A</u>
13	Total Contributions (Line 11 + line 12)	\$	<u>\$1000 my own account</u>
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	<u>N/A \$749.71</u>
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	<u>N/A</u>
16	Loan Repayments Made (Please list on Schedule "C")	\$	<u>N/A</u>
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$	<u>N/A</u>
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$	<u>N/A</u>
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$	<u>749.71</u>
20	Total Spending (Line 18 + line 19)	\$	<u>749.71</u>

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

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

Full Name of Committee/Person: KAREN F. KALAVITY: KAREN FOR WESTMINSTER

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>9/16/2023</u>	4. Name (Last, First): <u>KALAVITY, KAREN</u>
2. <u>Contribution Amt.</u> \$ <u>1000</u>	5. Address: <u>9940 Westcliff Pkwy # 1614</u>
3. <u>Aggregate Amt. *</u> \$ <u>1000</u>	6. City/State/Zip: <u>Westminster, CO 80021</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>money from my account to fund campaign</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>self-employed, retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Landscape Architect</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).

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

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

Full Name of Committee/Person: KAREN F. KALAVITY: KAREN FOR Westminster

PLEASE PRINT/TYPED

1. <u>Date Expended</u> <u>9/17/23</u>	4. Name: <u>Web.com</u>
2. <u>Amount</u> \$ <u>99.00</u>	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>web hosting</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9/19/23</u>	4. Name: <u>Victory store</u>
2. <u>Amount</u> \$ <u>346.50</u>	5. Address: <u>5200 SW 30th St.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Davenport, IOWA 52802</u>
	7. Purpose of Expenditure: <u>100 yard signs</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9/20/23</u>	4. Name: <u>GOT PRINT</u>
2. <u>Amount</u> \$ <u>86.99</u>	5. Address: <u>BURBANK Airport Center, 7651 N. San Fernando Rd.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Burbank, CA 91505</u>
	7. Purpose of Expenditure: <u>print postcards & door hangers</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/9/23</u>	4. Name: <u>Regis Print Shop</u>
2. <u>Amount</u> \$ _____	5. Address: <u>3333 Regis Blvd.</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>40 Door Hangers</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/10/23</u>	4. Name: <u>GOT PRINT</u>
2. <u>Amount</u> \$ <u>178.82</u>	5. Address: <u>Burbank Airport Center, 7651 N. San Fernando Rd.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Burbank, CO 91505</u>
	7. Purpose of Expenditure: <u>1000 Door Hangers</u>
	<input type="checkbox"/> Check box if Electioneering Communication

10/11/23
33.05

Office Depot, 9349 Shendan Blvd.
Westminster CO, 80631

Schedule C - Loans

Full Name of Committee/Person: KAREN F. KALAVITY: KAREN FOR city minister

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(e)] 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: KAREN F. KALAVITY : KAREN FORUMINISTU

Returned Contributions

(Previously reported on Schedule A – Contributions accepted and then returned to donors)

PLEASE PRINT/TYPE

<u>1. Date Accepted</u>	4. Name (Last, First): <u>N/A</u>
<u>2. Date Returned</u>	5. Address: _____
<u>3. Amount</u>	6. City/State/Zip: _____
\$	7. Purpose: _____

<u>1. Date Accepted</u>	4. Name (Last, First): _____
<u>2. Date Returned</u>	5. Address: _____
<u>3. 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

<u>1. Date Expended</u>	4. Name (Last, First): <u>N/A</u>
<u>2. Date Returned</u>	5. Address: _____
<u>3. Amount</u>	6. City/State/Zip: _____
\$	7. Comment (Optional): _____

<u>1. Date Expended</u>	4. Name (Last, First): _____
<u>2. Date Returned</u>	5. Address: _____
<u>3. 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: KAREN F. KALAVITZ: KAREN FOR Westminster

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: _____
<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> \$	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>): _____
	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: _____
<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."



Karen Kalavity: Candidate for Westminster City Council

October 17th Expense Report

9940 Westcliff Parkway, Broomfield, Colorado 80021, (303) 997-4041, integradesign1@yahoo.com

Web Hosting

Web.com **9/17/23** **\$99.00**

100 Yard Signs **9/19/23** **\$346.50**
Victory Store, 5200 SW 30th Street,
Davenport, Iowa, 52802
1-888-968-2688, pati@victorystore.com
#75430

500 Postcards **9/20/23** **\$86.99**
GotPrint, Burbank Airport Center
7651 N. San Fernando Rd.,
Burbank, CA 91505
1(877) 922-7374, gotprint.com
#27984769

40 Door Hangers **10/9/23** **\$5.35**
Regis Print Shop,
3333 Regis Blvd.
Denver, CO 80221
(303) 922-7374, CPC@regis.edu

1000 Door Hangers **10/10/23** **\$178.82**
GotPrint, Burbank Airport Center
7651 N. San Fernando Rd.,
Burbank, CA 91505
1(877) 922-7374, gotprint.com
#28042175

Miscellaneous office supplies **10/11/23** **\$33.05**
(rubber bands, hole puncher & reading glasses)
Office Depot, Westminster
9349 Sheridan Blvd. Westminster, 80031
1(303) 630-8722

Banners (already on hand from 2021)
Business Cards (already on hand from 2021)

\$749.71

\$1000 in Karen For Westminster Account (Westerra Credit Union) 9/16/23
Karen Kalavity is the sole contributor to this account

\$1000 - \$749.71 = \$250.29 Cash on hand as of October 17th, 2023