Colorado Secretary of State Elections Division 1700 Broadway, Ste. 200 Denver, CO 80290

(303) 894-2200 ext. 6383 Ph: (303) 869-4861 Fax: Email: cpfhelp@sos.state.co.us

www.sos.state.co.us



RECEIVED OCT 1 1 2021

REPORT OF CONTRIBUTIONS AND EXPENDITURES

CITY OF GREELEY

	(1-45-108, C.R.S.)		City Clerk's Office
Full Name of Committee/Person:	Better Ro	ands for	Greeley
111 CC 14 D	Ac Shown (In Panietration		,
Address of Committee/Person:	P.O. Box 3	37272	-
City, State & Zip Code:	Gredey, Ci	80633	
Committee Type:	ISSUE		
Name and Address of Financial Institution	Bank of Colored	20,7017 W.10	51, Greeley, CD 80634
SOS ID NUMBER	(state and county committees):		
Type of Report			
Regularly Scheduled Filing			
Amended Filing. This amend Submit changes or new informati)	
Termination Report. (Termin	nation Reports MUST Have a M	Monetary Balance of Z	ero in Line 5)
Check this box if this Repor	t Contains Electioneering	g Communications	Information
Reporting Period Covered:	August 5, 2021	Through	October 7, 2021
Declared Total Spending (if apple [Art. XXVIII, Sec. 4(1)]			<i>Site</i>
		1	Totals Detailed Summary Page
1 Funds on Hand at the Beginning	of Reporting Period (mone	etary only)	\$ 0
2 Total Monetary Contributions (lin	ne 11)		\$ 46.600
3 Total of Monetary Contributions	& Beginning Amount (lin	e 1 + line 2)	\$ 46,600
4 Total Monetary Expenditures (line	e 19)		\$ 15,605,57
5 Funds on Hand at the End of Rep	orting Period (monetary) (li	ne 3 – line 4)	\$ 30,994,43
The appropriate officer sh	nall impose a penalty of \$5 [Art. XXVIII Se		day that a report is filed late.
Authorization (Must be completed by penalty of perjury, that to the best of notincluding any contributions received in permissible sources.	ny knowledge or belief all co n the form of membership d	ontributions received ues transferred by a	d during this reporting period, membership organization, are from
Print Registered Agent's Name:	ALAN G. M	2011	10/11/2021
		June	Date: 10/11/100
Print Candidate Name: N/A			
Candidates Signature:N/F	t		Date:

DETAILED SUMMARY

Full Name of Committee/Person: Better Roads for Greley

Current Reporting Period:	August 5,7	WZ] Through	October 7	2021
	0			

Fund	s on hand at the beginning of reporting period (Monetary Only)	\$ 0
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 46,600
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 0
8	Loans Received (Please list on Schedule "C")	\$ O
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ O
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ O
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 46,600
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 6
13	Total Contributions (Line 11 + line 12)	\$ 46,600
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 14,105,57
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ O
16	Loan Repayments Made (Please list on Schedule "C")	\$ 0
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ 1,500,00
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ 0
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 15,605.57
20	Total Spending (Line 18 + line 19)	\$ 15,605.57

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

Full Name of (Committee/Person: Better Roods per greeley
WARNIN	G: Please read the instruction page for Schedule "A" before completing!
PLEASE PRINT/	ТҮРЕ
1. Date Accepted 10 Aug 21 2. Contribution Amt. \$ 5,000 3. Aggregate Amt. * \$ 5,000 Check box if Electioneering Communication	4. Name (Last, First): Monfort, Dick 5. Address: 1891 Cuntis Street 6. City/State/Zip: Denver, Co 80202 7. Description: Check donation 8. Employer (if applicable, mandatory): Colorado Reckies 9. Occupation (if applicable, mandatory): Owner
1. Date Accepted 10 Aug 21 2. Contribution Amt. \$ 2006 3. Aggregate Amt. * \$ 4000 Check box if Electioneering Communication	4. Name (Last, First): Troffer, Michael 5. Address: 1757 40th Avenue 6. City/State/Zip: Greeley, W 80634 7. Description: Check donation 8. Employer (if applicable, mandatory): Front Range Roofing Systems, UC 9. Occupation (if applicable, mandatory): Owner
1. Date Accepted 10 Aug 26 2. Contribution Amt. \$ 1,000 3. Aggregate Amt. * \$ 1,000 Check box if Electioneering Communication	4. Name (Last, First): Ehrlich Management LLC 5. Address: 4627 W. 20TH ST, RD., Suite A 6. City/State/Zip: 6reeley, W 80634 7. Description: Chech donation 8. Employer (if applicable, mandatory): 9. Occupation (if applicable, mandatory):
1. Date Accepted 17 My 1 2. Contribution Amt. \$ 600 3. Aggregate Amt. * \$ 600 Check box if Electioneering	4. Name (Last, First): Baken Team Corporation 5. Address: 2021 Clubhouse Drive, Scrite 100 6. City/State/Zip: Greeley, Co 80634 7. Description: checic duration 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).

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

Full Name of C	Committee/Person: Better Roads for Greekey		
WARNING: Please read the instruction page for Schedule "A" before completing!			
PLEASE PRINT/T 1. Date Accepted			
2. Contribution Amt. \$ 1,500 3. Aggregate Amt. * \$ 1,500 Check box if Electioneering Communication	4. Name (Last, First): Yoder Management LCC 5. Address: 2699 47 th Avenue 6. City/State/Zip: Greeley, Co 80634 7. Description: check donation 8. Employer (if applicable, mandatory): 9. Occupation (if applicable, mandatory):		
1. Date Accepted 17 Cuy 21 2. Contribution Amt. \$ 1,000 3. Aggregate Amt. * \$ 1,000 Check box if Electioneering Communication	4. Name (Last, First): Evans Management Group, LLP 5. Address: 1821 Frontier Road 6. City/State/Zip: Greeley, Co Golo 34 7. Description: Check denotion 8. Employer (if applicable, mandatory): 9. Occupation (if applicable, mandatory):		
1. Date Accepted 24 Aug 21 2. Contribution Amt. \$ 560 3. Aggregate Amt. * \$ 500 Check box if Electioneering Communication	4. Name (Last, First): All Terrain Land Scuping 5. Address: 5312 W. 9fn St. Drive, Swife 120 6. City/State/Zip: Greeleg, CO 80634 7. Description: check donation 8. Employer (if applicable, mandatory): 9. Occupation (if applicable, mandatory):		
1. Date Accepted 24 Aug 24 2. Contribution Amt. \$ i,500 3. Aggregate Amt. * \$ l,500 Check box if Electioneering Communication * For contribution lim Communication	4. Name (Last, First): FSY Partners hip 5. Address: P.G. Bot 1986 6. City/State/Zip: Greedey, W 80632 7. Description: Chech denotion 8. Employer (if applicable, mandatory): 9. Occupation (if applicable, mandatory): 1. Occupation (if applicable, mandatory): 1. Occupation (if applicable, mandatory): 2. Occupation (if applicable, mandatory): 3. Occupation (if applicable, mandatory): 4. Name (Last, First): FSY Partners hip 8. Employer (if applicable, mandatory): 9. Occupation (if applicable, mandatory): 1. Occupation (if applicable, mandatory): 1. Occupation (if applicable, mandatory): 2. Occupation (if applicable, mandatory): 3. Occupation (if applicable, mandatory): 4. Name (Last, First): FSY Partners hip 8. Employer (if applicable, mandatory): 9. Occupation (if applicable, mandatory): 1. Occupation (if applicable, mandatory): 1. Occupation (if applicable, mandatory): 2. Occupation (if applicable, mandatory): 3. Occupation (if applicable, mandatory): 4. Occupation (if applicable, mandatory): 4. Occupation (if applicable, mandatory): 4. Occupation (if applicable, mandatory): 5. Occupation (if applicable, mandatory): 6. Occupation (if applicable, mandatory): 6. Occupation (if applicable, mandatory): 7. Occupation (if applicable, mandatory): 8. Occupation (if applicable, mandatory): 9. Occupation (if applicable, mandatory): 1. Occupation (if applicable, mandatory): 1. Occupation (if applicable, mandatory): 1. Occupation (if applicable, mandatory): 2. Occupation (if applicable, mandatory): 3. Occupation (if applicable, mandatory): 4. Occupation (if applicable, mandatory): 5. Occupation (if applicable, mandatory): 6. Occupation (if applicable, mandatory): 6. Occupation (if applicable, mandatory): 7. Occupation (if applicable, mandatory): 8. Occupation (if applicable, mandatory): 9. Occupation (if applicable, mandatory): 1. Occupation (if applicabl		

XXVIII, Sec. 2(14).

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

Full Name of C	Full Name of Committee/Person: Better Roads for Greelen			
	WARNING: Please read the instruction page for Schedule "A" before completing!			
PLEASE PRINT/I	TYPE			
1. Date Accepted	4. Name (Last, First): Richmank Holdings, Finc.			
24 aug 21 2. Contribution Amt.	5. Address: 5200 W. 2074 St.			
\$ 10,000	6. City/State/Zip: Greeley, Co 80634			
3. Aggregate Amt. * \$ [0] 000	7. Description: check dnation			
Check box if	8. Employer (if applicable, mandatory):			
Electioneering Communication	9. Occupation (if applicable, mandatory):			
1. Date Accepted 31 Aug 2)	4. Name (Last, First): Colovado Asphalt Pavement ASSOC,			
2. Contribution Amt.	5. Address: 6880 S. Yosemite CT, Swite 110			
\$ 2,500	6. City/State/Zip: Centennial, Co 80112			
3. Aggregate Amt. * \$ 2,500	7. Description: _ check donation			
Check box if	8. Employer (if applicable, mandatory):			
Electioneering Communication	9. Occupation (if applicable, mandatory):			
1. Date Accepted	4. Name (Last, First): Thomas and Tyler UC 5. Address: 3936 19 th STreet Lane			
2. Contribution Amt.	5. Address: 3936 19th STreet Lane			
\$ 500	6. City/State/Zip: Greeley, Co			
3. Aggregate Amt. * \$ 500	7. Description: Check duration			
Check box if	8. Employer (if applicable, mandatory):			
Electioneering Communication	9. Occupation (if applicable, mandatory):			
1. Date Accepted	4. Name (Last, First): Todd, John			
2. Contribution Amt.	5. Address: 1756 37th Avenue Place			
\$ 1,000	6. City/State/Zip: Greeles, W 806			
3. Aggregate Amt. * \$ 1,000	7. Description: _ check don Lives			
Check box if	8. Employer (if applicable, mandatory):			
Electioneering	9. Occupation (if applicable, mandatory):			
Communication * For contribution lim	its within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate			

* 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).

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

Full Name of C	Full Name of Committee/Person:		
WARNING	WARNING: Please read the instruction page for Schedule "A" before completing!		
PLEASE PRINT/T	YPE		
1. <u>Date Accepted</u> 7 Sep 21	4. Name (Last, First): Phelps-To intoh, Inc.		
2. <u>Contribution Amt.</u> \$ 5,000	5. Address: BOBGY 9 6. City/State/Zip: Greeley, Co 80632		
3. Aggregate Amt. * \$ 5,000	7. Description: _ chech dration_		
Check box if Electioneering Communication	8. Employer (if applicable, mandatory): 9. Occupation (if applicable, mandatory): ———————————————————————————————————		
1. Date Accepted 7 Sep 21 2. Contribution Amt. \$ 500	4. Name (Last, First): Miller, Anthony 5. Address: 451 N. Bris Dane Avenue 6. City/State/Zip: Greeley, Co		
3. Aggregate Amt. * \$ 500 Check box if Electioneering Communication	7. Description:		
1. Date Accepted 7 Sep 2 2. Contribution Amt. \$ 1,000 3. Aggregate Amt. * \$ 1,000 Check box if Electioneering Communication	4. Name (Last, First): Norton, Thomas 5. Address: 1204 50 fm Avenue 6. City/State/Zip: Greeley, Co 80634 7. Description: check donatris 8. Employer (if applicable, mandatory): retired 9. Occupation (if applicable, mandatory):		
1. Date Accepted 13 Sep 2 2. Contribution Amt. \$ 500 3. Aggregate Amt. * \$ 500 Check box if Electioneering	4. Name (Last, First): Otis, Fred 5. Address: 690) West C Street 6. City/State/Zip: Greeley, Cl 7. Description: Check discountion 8. Employer (if applicable, mandatory): Self 9. Occupation (if applicable, mandatory): Lawyer		
\$ 1,000 Check box if Electioneering Communication 1. Date Accepted 13 Sep 4 2. Contribution Amt. \$ 500 3. Aggregate Amt. * \$ 500 Check box if Electioneering Communication	8. Employer (if applicable, mandatory): 9. Occupation (if applicable, mandatory): 4. Name (Last, First): 6. Address: 6. City/State/Zip: 6. City/State/Zip: 6. City/State/Zip: 6. Che che de		

^{*} 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).

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

Full Name of Committee/Person:	Better	Reads	for	9	reeles	

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

PLEASE PRINT/T	TYPE
Date Accepted	4. Name (Last, First): Itall-Irwin Corporation
14 Sep 21	5. Address: 5586 W. 19th St., Swite 200
2. Contribution Amt. \$ 500	6. City/State/Zip: Greeley, Co 80637
3. Aggregate Amt. *	
\$ 500	7. Description: Check donation
Check box if	8. Employer (if applicable, mandatory):
Electioneering Communication	9. Occupation (if applicable, mandatory):
1. Date Accepted	4. Name (Last, First): Hall, George
2. Contribution Amt.	5. Address: 4274 W, 14th St. Pd.
\$ 2,000	6. City/State/Zip: Greeley, Co 80634
3. Aggregate Amt. *	7. Description: check donation
\$ 2,000	8. Employer (if applicable, mandatory): Hall- Fruin Corporation
Check box if Electioneering	9. Occupation (if applicable, mandatory):
Communication	y, coopman (a spp. sec.)
1. Date Accepted	4. Name (Last, First): Martin Marietta Political Contributions Con
20 Dep 2	5. Address: P.O. Box 30013
\$ 5,000	6. City/State/Zip: Raleigh, NC 27622
3. Aggregate Amt. *	7. Description: check donation
\$5,000	8. Employer (if applicable, mandatory):
Check box if Electioneering	9. Occupation (if applicable, mandatory):
Communication	
1. Date Accepted	4. Name (Last, First): A-1 Chipseal Company
2. Contribution Amt.	5. Address: 2505 E. 74th Avenue
\$ 2,500	6. City/State/Zip: Denvez, Co 80229
3. Aggregate Amt. *	7. Description: check dnation
\$ 2,500	8. Employer (if applicable, mandatory):
Check box if Electioneering	9. Occupation (if applicable, mandatory):
Communication	Part of the second seco

* 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).

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

Full Name of Committee/Person: Better Roads for Treleg

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

PLEASE PRINT/I	YPE
1. Date Accepted 20 Sap 2(2. Contribution Amt. \$ 1,000 3. Aggregate Amt. * \$ 1,000 Check box if Electioneering Communication	4. Name (Last, First): Wag ner Equip Ment Company 5. Address: 7260 E. Crossroads Ce4 6. City/State/Zip: Windsor, Crosssoo 7. Description: Check domain 8. Employer (if applicable, mandatory): 9. Occupation (if applicable, mandatory):
1. Date Accepted 2 & Sep 21 2. Contribution Amt. \$ 1,000 3. Aggregate Amt. * \$ 1,000 Check box if Electioneering Communication	4. Name (Last, First): Duran Excavating Company 5. Address: 14332 County Road Cey 6. City/State/Zip: Greeley, Co 80631 7. Description: Chech duration 8. Employer (if applicable, mandatory): 9. Occupation (if applicable, mandatory):
1. Date Accepted 4 D T 2/ 2. Contribution Amt. \$ 500 3. Aggregate Amt. * \$ 500 Check box if Electioneering Communication	4. Name (Last, First): Anderson, Matthew 5. Address: P.O. Box 1075 6. City/State/Zip: Greeley, CO 80632 7. Description: Check dinature 8. Employer (if applicable, mandatory): AnCon II Constructors 9. Occupation (if applicable, mandatory): General Contractor
Date Accepted Contribution Amt. S Aggregate Amt. * Check box if Electioneering Communication	4. Name (Last, First):

* 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).

Full Name of Committe	ee/Person: Better Roads for Greeley
PLEASE PRINT/TYPE	
1. Date Expended 22 Aug 21	4. Name: Fact Signs
2. Amount	5. Address: 2601 W. 28TH ST.
\$ 1643, 67 3.Recipient is (optional):	6. City/State/Zip: Greeley, Co 80634
Committee	7. Purpose of Expenditure: 4x8 Signs
Non-Committee	Check box if Electioneering Communication
1. Date Expended 29 Sep 21	4. Name: Greeley Tribune
2. Amount	5. Address: P.O. Box 337228
\$ 3870.00 3.Recipient is (optional):	6. City/State/Zip: Greeley, Co 80633
Committee	7. Purpose of Expenditure: advertising
Non-Committee	Check box if Electioneering Communication
1. Date Expended 30 Sep 21	4. Name: Consider It There
2. Amount	5. Address: 812 11th Storeet #2
\$ 4841,90 3.Recipient is (optional):	6. City/State/Zip: Greeley, Co 80631
Committee	7. Purpose of Expenditure: mailers
Non-Committee	Check box if Electioneering Communication
1. Date Expended 7 o c 7 2/	4. Name: KFKA
2. Amount	5. Address: 820 ilta Ruenue
\$ 750 00 3.Recipient is (optional):	6. City/State/Zip: Greeley, Co 80631
Committee	7. Purpose of Expenditure: radio ads
Non-Committee	Check box if Electioneering Communication
1. Date Expended 7 or 21	4. Name: Greeley Tribune
2. Amount	5. Address: P.O. Box 337228
\$ 3,000.00	6. City/State/Zip: Greeley, Co 80633
3.Recipient is (optional): Committee	7. Purpose of Expenditure: digital ads
Non-Committee	Check box if Electioneering Communication

Schedule D - Returned Contributions & Expenditures

Full Name of Committee/Person: Better Roads for Greeleg **Returned Contributions** (Previously reported on Schedule A – Contributions accepted and then returned to donors) PLEASE PRINT/TYPE 1. Date Accepted 4. Name (Last, First): FSY Partnership 24 Aug 21 5. Address: PO. Box 1986 2. Date Returned 27 Aug 2/ 6. City/State/Zip: Greeley, Co 80632 7. Purpose: donation made by mistake. \$ 1,500,00 1. Date Accepted 4. Name (Last, First): 2. Date Returned 5. Address: _____ 6. City/State/Zip: _____ 3. Amount 7. Purpose: **Returned Expenditures** (Previously reported on Schedule B – Expenditures returned or refunded to the committee) PLEASE PRINT/TYPE 1. Date Expended 4. Name (Last, First): 2. Date Returned 5. Address: City/State/Zip: ___ 3. Amount 7. Comment (Optional): 1. Date Expended 4. Name (Last, First): 2. Date Returned 5. Address: _____ 6. City/State/Zip: 3. Amount Comment (Optional): ____ \$