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SEP 04 2025

City Clerk's Office
 City of Westminster

REPORT OF CONTRIBUTIONS AND EXPENDITURE

Article XXVIII of the Colorado Constitution and Tital 1, Article 45 of the Colorado Revised Statute (C.R.S.)

Full Name of Committee/Person: KATHY STROUD FOR WESTMINSTER
As Shown On Registration

Address of Committee/Person: [REDACTED]

City, State & Zip Code: [REDACTED]

Committee Type: Candidate Committee

Name and Address of Financial Institution: WESTERRA CREDIT UNION
3700 E. Alameda Ave. DENVER, Co 80209

COMMITTEE ID NUMBER [REDACTED]

Type of Report

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

Reporting Period Covered: 10-28 OR 12-6-24 Date **Through** 8-31-25 Date

Declared Total Spending (if applicable) [Art. XXVIII, Sec. 4(1)] \$ N/A

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ <u>0</u>
2	Total Monetary Contributions (line 11)	\$ <u>3,620.00</u>
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ <u>3,620.00</u>
4	Total Monetary Expenditures (line 19)	\$ <u>3,292.40</u>
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ <u>327.60</u>

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: KATHRYN STROUD

Registered Agent's Signature: [Signature] Date: 9-1-25

Print Candidate Name: KATHRYN "KATHY" STROUD

Candidates Signature: [Signature] Date: 9-1-25

DETAILED SUMMARY

Full Name of Committee/Person: Kathy STROUD FOR WESTMINSTER

Current Reporting Period: 10-28 or 12-6-24 Through 8-31-25

Funds on hand at the beginning of reporting period (Monetary Only)		\$ \emptyset
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "A")	\$ 1,620.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ \emptyset
8	Loans Received (From Schedule "C")	\$ 2,000.00
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ \emptyset
10	Returned Expenditures (from recipient) (From Schedule "D")	\$ \emptyset
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 3,620.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 400.00
13	Total Contributions (Line 11 + line 12)	\$ 4,020.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$ 3,292.40
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ \emptyset
16	Loan Repayments Made (From Schedule "C")	\$ \emptyset
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ \emptyset
18	Total Coordinated Non-Monetary (in-kind) Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ \emptyset
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 3,292.40
20	Total Spending (Line 18 + line 19)	\$ 3,292.40

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

Page 1/2

Full Name of Committee/Person: Kathy Stroud for Westminster

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 8-12-25	4. Name (Last, First): <u>Bonniwell, Julie</u>
2. <u>Contribution Amt.</u> \$ 400.00	5. Address: [REDACTED]
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Westminster, CO 80013</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION (by check)</u>
	8. Employer (if applicable, mandatory): <u>Self-employed</u>
	9. Occupation (if applicable, mandatory): <u>Media</u>

1. <u>Date Accepted</u> 8-12-25	4. Name (Last, First): <u>Bonniwell, Chuck</u>
2. <u>Contribution Amt.</u> \$ 400.00	5. Address: [REDACTED]
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Westminster, CO 80031</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION (by check)</u>
	8. Employer (if applicable, mandatory): <u>Self-employed</u>
	9. Occupation (if applicable, mandatory): <u>Media</u>

1. <u>Date Accepted</u> 8-15-25	4. Name (Last, First): <u>Westhafer, Theresa</u>
2. <u>Contribution Amt.</u> \$ 400.00	5. Address: [REDACTED]
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Westminster, CO 80031</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION (by check)</u>
	8. Employer (if applicable, mandatory): <u>Westco</u>
	9. Occupation (if applicable, mandatory): <u>HVAC/Construction</u>

1. <u>Date Accepted</u> 8-26-25	4. Name (Last, First): <u>Schnur, Marlene</u>
2. <u>Contribution Amt.</u> \$ 200.00	5. Address: [REDACTED]
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION (by check)</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</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)

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Full Name of Committee/Person: Kathy Stroud for Westminster

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 8-27-25	4. Name (Last, First): <u>SCHROEDER, Jackie</u>
2. <u>Contribution Amt.</u> \$ 20.00	5. Address: [REDACTED]
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Littleton, CO 80127</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION through AneDot</u>
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): <u>N/A</u>

1. <u>Date Accepted</u> 8-30-25	4. Name (Last, First): <u>COMERFORD, Roland</u>
2. <u>Contribution Amt.</u> \$ 200.00	5. Address: [REDACTED]
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Westminster, CO 80031</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CASH DONATION (by check)</u>
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): <u>Retired</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, 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.]

PAGE 1/2

Full Name of Committee/Person: Kathy Stroud FOR WESTMINSTER

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 8-17-25	4. Name: <u>Cloudflare, Inc.</u>
2. <u>Amount</u> \$ 10.44	5. Address: <u>101 Townsend Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>SAN FRANCISCO, CA 94107</u>
	7. Purpose of Expenditure: <u>Domain Registration Fee (for Website)</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 8-17-25	4. Name: <u>Apple, Inc.</u>
2. <u>Amount</u> \$ 2,451.38	5. Address: <u>ONE Apple Parkway</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Cupertino, CA 95014</u>
	7. Purpose of Expenditure: <u>Computer</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 8-21-25	4. Name: <u>Delivery Signs</u>
2. <u>Amount</u> \$ 370.00	5. Address: <u>40 West Crystal Lake Street, Suite #100</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Orlando, FL 32806</u>
	7. Purpose of Expenditure: <u>100 YARD SIGNS</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 8-21-25	4. Name: <u>VISTAPRINT</u>
2. <u>Amount</u> \$ 400.60	5. Address: <u>275 WYMAN STREET</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Waltham, MA 02451</u>
	7. Purpose of Expenditure: <u>500 business CARDS + 5000 Door Hangers</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 8-21-25	4. Name: <u>NAMEbadges.com</u>
2. <u>Amount</u> \$ 18.02	5. Address: <u>1544 N. 8th Street (PO Box 2110)</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>MANITOWOC, WI 54221</u>
	7. Purpose of Expenditure: <u>CANDIDATE NAME BADGE</u> <input type="checkbox"/> Check box if Electioneering Communication

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

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

PAGE 2/2

Full Name of Committee/Person: Kathy Stroud FOR WESTMINSTER

PLEASE PRINT/TYPE

1. Date Expended <u>8-25-25</u>	4. Name: <u>SQUARE SPACE</u>
2. Amount \$ <u>22.50</u>	5. Address: <u>225 VARICK Street, 12th Floor</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>NEW YORK, NY 10014</u>
	7. Purpose of Expenditure: <u>Website / BASIC PLAN / 1st MONTH Subscription</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8-24-25</u>	4. Name: <u>HOME Depot</u>
2. Amount \$ <u>7.56</u>	5. Address: <u>7125 W. 88th AVENUE</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>WESTMINSTER, CO 80021</u>
	7. Purpose of Expenditure: <u>PAINT for BIG Sign</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8-27-25</u>	4. Name: <u>Michaels</u>
2. Amount \$ <u>10.80</u>	5. Address: <u>10450 TOWN CENTER Drive, Suite #400</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>WESTMINSTER, CO 80021</u>
	7. Purpose of Expenditure: <u>50 TY CARDS + ENVELOPES and Pens (+ Red + Blue)</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8-28-25</u>	4. Name: <u>Anedot Inc.</u>
2. Amount \$ <u>1.10</u>	5. Address: <u>3723 Greenville Avenue, Suite #41002</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>DALLAS, TX 75206</u>
	7. Purpose of Expenditure: <u>fees charged by Anedot</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended	4. Name: _____
2. Amount \$ _____	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 C - Loans

Candidate Committees only

PAGE 1/2

Full Name of Committee/Person: KATHY STROUD FOR WESTMINSTER

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): STROUD, KATHRYN - (Candidate)

Address: [REDACTED]

City/State/Zip: WESTMINSTER, CO 80021

Original Amount of Loan: \$ 1,000.00 Interest Rate: 0

Loan Amount Received This Reporting Period: \$ 1,000.00

Total of All Loans This Reporting Period: \$ 1,000.00
(Place on line 8 of Detailed Summary Report)

Principal Amount Paid This Reporting Period: \$ 0

Interest Amount Paid This Reporting Period: \$ 0

Amount Repaid This Reporting Period: \$ 0
(Amount Repaid is sum of Principal & Interest entered on Detail Summary)

Total Repayments Made: \$ 0
(Sum of Schedule C pages, Place on line 16 of Detailed Summary)

Outstanding Balance: \$ 1,000.00

TERMS OF LOAN: 8-12-25
Date Loan Received

11-29-25
Due Date for Final Payment

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, City, State, Zip	Amount Guaranteed
<u>N/A</u>		

Schedule C - Loans

Candidate Committees only

PAGE 2/2

Full Name of Committee/Person: KATHY STROUD FOR WESTMINSTER

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): STROUD, KATHRYN - (Candidate)

Address: [REDACTED]

City/State/Zip: WESTMINSTER, CO 80021

Original Amount of Loan: \$ 1,000.00 Interest Rate: Ø

Loan Amount Received This Reporting Period: \$ 1,000.00

Total of All Loans This Reporting Period: \$ 2,000.00
(Place on line 8 of Detailed Summary Report)

Principal Amount Paid This Reporting Period: \$ Ø

Interest Amount Paid This Reporting Period: \$ Ø

Amount Repaid This Reporting Period: \$ Ø
(Amount Repaid is sum of Principal & Interest entered on Detail Summary)

Total Repayments Made: \$ Ø
(Sum of Schedule C pages, Place on line 16 of Detailed Summary)

Outstanding Balance: \$ 2,000.00

TERMS OF LOAN: 8-27-25
Date Loan Received

11-29-25
Due Date for Final Payment

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, City, State, Zip	Amount Guaranteed
N/A		

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: Kathy Stroud for Westminster

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): _____
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

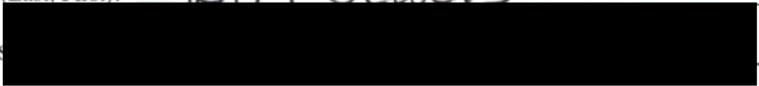
1. <u>Date Expended</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Comment (Optional): _____

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: Kathy Stroud For Westminster

PLEASE PRINT/TYPE

1. <u>Date Provided</u> 8-13-25	4. Name (Last, First): <u>Gray, Jewels</u>
2. <u>Fair Market Value</u> \$ 400.00	5. Address: 
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: <u>Denver, CO 80205</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Photography Services</u>
	8. Employer (if applicable, mandatory): <u>Self employed</u>
	9. Occupation (if applicable, mandatory): <u>Photographer</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, mandatory): _____
	9. Occupation (if applicable, mandatory): _____
	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, mandatory): _____
	9. Occupation (if applicable, mandatory): _____
	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."