

Space Below For Office Use Only

Colorado Secretary of State
Elections Division
1700 Broadway, Ste. 200
Denver, CO 80290
Ph: (303) 894-2200 dial 3
Fax: (303) 869-4861
Email: cpfhelp@sos.state.co.us
www.sos.state.co.us



RECEIVED
OCT 10 2025
City Clerk's Office
City of Westminster

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Article XXVIII of the Colorado Constitution and Tital 1, Article 45 of the Colorado Revised Statute

Full Name of Committee/Person: Karen Frances Kalavity
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, 7220 W. 88th Ave. Westminster, 80021

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: September 5th 2025 Date Through October 7th, 2025 Date

Declared Total Spending (if applicable) [Art. XXVIII, Sec. 4(1)] \$417

	Totals Detailed Summary Page
1 Funds on Hand at the Beginning of Reporting Period (monetary only)	\$300
2 Total Monetary Contributions (line 11)	\$267
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$567
4 Total Monetary Expenditures (line 19)	\$267
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 – line 4)	\$150

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 Kalavity

Registered Agent's Signature: Karen Kalavity Date: 10/6/2025

Print Candidate Name: Karen Kalavity

Candidates Signature: Karen Kalavity Date: 10/6/2025

DETAILED SUMMARY

Full Name of Committee/Person: Karen Frances Kalavity

Current Reporting Period: September 5th 2025

Through October 7th, 2025

Funds 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)] (From Schedule "A")	\$267
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$300 posters, literature, banners from last
8	Loans Received (From Schedule "C")	0 \$
9	Total of Other Receipts (Interest, Dividends, etc.)	\$0
10	Returned Expenditures (from recipient) (From Schedule "D")	\$0
11	Total Monetary Contributions (Total of lines 6 through 10)	\$267 \$
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$300
13	Total Contributions (Line 11 + line 12)	567 \$
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$267
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$150
16	Loan Repayments Made (From Schedule "C")	0 \$
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$0
18	Total Coordinated Non-Monetary (in-kind) Expenditures (Candidate/Candidate Committee & Political Parties only)	\$150
19	Total Monetary Expenditures (Total of lines 14 through 17)	267 \$
20	Total Spending (Line 18 + line 19)	417 \$

Schedule A Instructions

NOTE: In addition to the disclosure requirements of the constitution and statute please note provisions for specific Committee type, as follows:

Candidate, Issue, Political Party and Political Committee (PC)

- Required to disclose occupation **and** employer for all \$100 or more contributions made by natural persons. (Art. XXVIII, Sec. 7)

Small Donor Committee

- Accepts contributions of no more than \$50 per year, FROM NATURAL PERSONS ONLY who are U.S. citizens. [Art. XXVIII, Sec. 2(14)(a)]

Electioneering Communications Reporting

- Reporting required by persons spending \$1,000 or more on Electioneering Communications,
- Required to disclose occupation **and** employer for all \$250 or more contributions made by natural persons. (Art. XXVIII, Sec. 6)
- Corporate and Labor Organization funding are prohibited. (Art. XXVIII, Sec. 6)

Contribution Limits

(Art. XXVIII, Sec. 3 of the Colorado Constitution and Campaign and Political Finance Rule 10.16)

Political Committees (State, County, District & Local):

- \$575◇ per House of Representatives Election Cycle

Political Party (From any person other than Small Donor):

- \$ 3,650◇ per year no more than \$3,050◇ to state party.

Political Party (From Small Donor):

- \$18,425◇ per year no more than \$15,350◇ to state party.

Prohibitions on next page. Please refer to Article XXVIII, Section 3 of the Colorado Constitution for complete contribution limits and prohibited contributions.

PROHIBITED CONTRIBUTIONS

- No candidate's candidate committee shall accept contributions from, or make contributions to, another candidate committee.
- No person shall act as a conduit for a contribution to a candidate committee.
- It shall be unlawful for a corporation or labor organization to make contributions to a candidate committee or a political party. A corporation or labor organization may establish a political committee or small donor committee which may accept contributions or dues from employees, officeholders, shareholders, or members to make contributions to a candidate committee or political party.
- No candidate committee, political committee, small donor committee, or political party shall knowingly accept contributions from:
 - Any natural person who is not a citizen of the United States;
 - A foreign government; or
 - any foreign corporation that does not have the authority to transact business in this state pursuant to article 115 of title 7, C.R.S., or any successor section.
- No candidate committee, political committee, small donor committee, issue committee, or political party shall accept a contribution, or make an expenditure, in currency or coin exceeding one hundred dollars.
- No person shall make a contribution to a candidate committee, issue committee, political committee, small donor committee, or political party with the expectation that some or all of the amounts of such contribution will be reimbursed by another person. No person shall be reimbursed for a contribution made to any candidate committee, issue committee, political committee, small donor committee, or political party, nor shall any person make such reimbursement except as provided in subsection (8) of this section. [Art. XXVIII, Sec. 3(8)]

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

1

Full Name of Committee/Person: Karen Frances Kalavity

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> September 8th, 2025	4. Name (Last, First): <u>Karen Kalavity</u>
2. <u>Contribution Amt.</u> \$ 40	5. Address: <u>[REDACTED]</u>
3. <u>Aggregate Amt. *</u> \$ 40	6. City/State/Zip: <u>[REDACTED]</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Money for booth at Old Town Bev Capra Fair</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>self-employed</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Landscape Architect/Site Planner</u>

1. <u>Date Accepted</u> September 19th, 2025	4. Name (Last, First): <u>Karen Kalavity</u>
2. <u>Contribution Amt.</u> \$ 227	5. Address: <u>[REDACTED]</u>
3. <u>Aggregate Amt. *</u> \$ 227	6. City/State/Zip: <u>[REDACTED]</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Money to renew website</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>self-employed</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>landscape architect/site planner</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 Frances Kalavity

PLEASE PRINT/TYPE

1. <u>Date Expended</u> September 13th, 2025	4. Name: <u>Kaitlyn Pierce</u>
2. <u>Amount</u> \$	5. Address: <u>[REDACTED]</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Westminster</u>
	7. Purpose of Expenditure: <u>Artisan Fair Booth for Bev Capra Fall Event in Historic Westminster</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> September 20th, 2021	4. Name: <u>www.web.com</u>
2. <u>Amount</u> \$ 227	5. Address: <u>12808 Gran Bay Parkway West</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Jacksonville, Florida, 32256</u>
	7. Purpose of Expenditure: <u>website renewal</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

Schedule C - Loans

Candidate Committees only

Full Name of Committee/Person: Karen Frances Kalavity

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: \$ N/A

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 Frances Kalavity

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): <u>N/A</u>
2. <u>Date Returned</u>	5. Address: <u>N/A</u>
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): <u>N/A</u>
2. <u>Date Returned</u>	5. Address: <u>N/A</u>
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: Karen Frances Kalavity

PLEASE PRINT/TYPE

1. <u>Date Provided</u>	4. Name (Last, First): <u>N/A</u>
2. <u>Fair Market Value</u> \$	5. Address: <u>N/A</u>
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."