

City Clerk's Office
749 Main Street, Louisville, CO 80027
303.335.4536
MeredythM@LouisvilleCO.gov

REPORT OF CONTRIBUTIONS AND EXPENDITURES

(§1-45-108, C.R.S.)

Full Name of Committee/Person: Janette Kotichas

As shown on Registration

Full Address of Committee/Person: 278 Juniper Street Louisville, CO 80027

Name/Address of Financial Institution: First Bank of Colorado, 500 McCaslin Blvd, Louisville, CO 8--27

Type of Report

☐ Regularly Scheduled Filing

☐ Amended Filing for report filed on: _____

☒ Termination Report (Termination Report Must Have a Monetary Balance of Zero in Line 5)

Reporting Period Covered: October 31, 2025 through: November 14, 2025

Declared Total Spending (if applicable): \$ 301.94

TOTALS DETAILED SUMMARY PAGE

1. Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ <u>301.94</u>
2. Total Monetary Contributions (line 11)	\$ <u>0.00</u>
3. Total Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ <u>301.94</u>
4. Total Monetary Expenditure (line 19)	\$ <u>301.94</u>
5. Funds on Hand at the End of Reporting Period (monetary) (line 3 –line 4)	\$ <u>0.00</u>

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.*

The City's Election Official may impose a penalty of \$50.00 per day for each day that a report is filed late.

Print Registered Agent's Name: Janette Kotichas

☒ By checking this box, I am confirming that my typed name below is my legal name and serves as my electronic signature. I agree that my electronic signature is the legal equivalent of my manual signature on this document.

Signature: Janette Kotichas

Date: 10/10/2025

Print Candidate Name: _____

☐ By checking this box, I am confirming that my typed name below is my legal name and serves as my electronic signature. I agree that my electronic signature is the legal equivalent of my manual signature on this document.

Signature: _____

Date: _____

DETAILED SUMMARY

Full Name of Committee/Person: Janette Kotichas

Current Reporting Period: October 11, 2025 through October 31, 2025

Funds on hand at the beginning of reporting period (Monetary Only)	\$ <u>301.94</u>
6. Itemized Contributions \$20 or More (Please list on Schedule "A")	\$ <u>0.00</u>
7. Total of Non-Itemized Contributions (\$19.99 or less)	\$ <u>0.00</u>
8. Loans Received (Please list on Schedule "C")	\$ <u>0.00</u>
9. Total of Other Receipts (Interest, etc.)	\$ <u>0.00</u>
10. Returned Expenditures (From recipient) (Please list on Schedule "D")	\$ <u>0.00</u>
11. Total Monetary Contributions (Total of lines 6 – 10)	\$ <u>0.00</u>
12. Total Non-Monetary Contributions (Statement of Non-Monetary Contributions)	\$ <u>0.00</u>
13. Total Contributions (Line 11 + line 12)	\$ <u>0.00</u>
14. Itemized Expenditures \$20 or More (Please list on Schedule "B")	\$ <u>98.43</u>
15. Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ <u>0.00</u>
16. Loan Repayments Made (Please list on Schedule "C")	\$ <u>0.00</u>
17. Returned Contributions (To donor) (Please list on Schedule "D")	\$ <u>203.51</u>
18. Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee)	\$ <u>0.00</u>

19. Total Monetary Expenditures (Total of Lines 14 -17)	\$ <u>301.94</u>
20. Total Spending (Line 18 + line 19)	\$ <u>301.94</u>

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

Full Name of Committee / Person: Janette Kotichas

Reporting Period: 10/31/2025 -11/14/2025

Total Expenditures this reporting period: \$98.43

Person/Entity (to whom expenditure was made)	Address (include City, State, Zip)	Purpose	Date Expenditure Made	Amount of Expenditure
Tacos Aya Yay	1206 Centaur Village Dr, Lafayette, CO 80026	post campaign party	11/13/2025	\$75.00
King Soopers	1375 E South Boulder Rd, Louisville, CO	post campaign party	11/13/2025	\$23.43

Page 1 Total **\$98.43**

Person/Entity (to whom expenditure was made)	Address (include City, State, Zip)	Purpose	Date Expenditure Made	Amount of Expenditure
--	---------------------------------------	---------	--------------------------	--------------------------

Schedule D Returned Contributions & Expenditures

Full Name of Committee/Person: Janette Kotichas

Returned Contributions: *Contributions accepted and then returned to donors*

Contributor (Individual/Entity)	Address (include City/State/Zip)	Date Contribution Accepted	Date Contribution Returned	Amount of Contribution
Tamar Krantz	691 West Street Louisville, CO 80027	10/19/2025	11/13/2025	103.51
Tamar Krantz	691 West Street Louisville, CO 80027	10/25/2025	11/13/2025	100.00

Returned Expenditures: *Expenditures returned or refunded to the committee*

Person/Entity (to whom expenditure was made)	Address (include City/State/Zip)	Date Expenditure Made	Date Expenditure Returned	Amount of Expenditure