



City of Brighton  
 500 South 4<sup>th</sup> Avenue  
 Brighton, CO 80601  
 303-655-2056

Space Below For Office Use Only

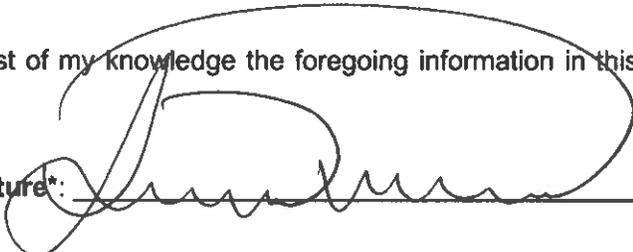


**STATEMENT OF PERSONAL EXPENDITURES BY A CANDIDATE**  
 [1-45-108(1) & 1-45-109, C.R.S. and CPF Rule 2.1]

For use by a candidate who is expending their personal funds but is NOT receiving contributions and does not have a candidate committee. A candidate who receives contributions must register a candidate committee before accepting contributions and file disclosure reports as a committee.

Candidate Name\*: Jessie Williams  
 Candidate Address\*: 4459 Mt. Sneffels St.  
 City\*: Brighton State\*: Co Zip Code\*: 80601  
 Office\*: City Council District No.\*: Ward 1 Election Year\*: 2025  
 Reporting Period\*: Beginning Date: 09/05/2025 Ending Date: 10/17/2025

I certify to the best of my knowledge the foregoing information in this Statement of Personal Expenditures is true and correct.

Candidate Signature\*:  Date\*: 10-17-2025

Total Amount of Non-Itemized Expenditures (\$19.99 or less)\*: \$ 0.00

Expenditures exceeding \$19.99 shall be itemized and listed below.

Continue to next page(s) to report Itemized Expenditures which are expenditure(s) exceeding \$19.99 (one-time and/or in the aggregate) during the reporting period. Use as many pages as needed.

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Date Expended: 10/09/2025	Amount: \$ 765.00
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Recipient/Vendor Name:  
Kaplan Strategies

Recipient/Vendor Address:  
2602 Lounsbury ct Kissimmee, FI 34746

Purpose/Description:  
P2P Texting

Is this Electioneering Communication?       YES       NO

If applicable and YES is selected, the fields below are required.

Method of Communication:		
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Communication Dates:		
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Candidates mentioned in/on communication:

Name:	Office/District:
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Name:	Office/District:
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Date Expended:	Amount: \$
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Recipient/Vendor Name:

Recipient/Vendor Address:

Purpose/Description:

Is this Electioneering Communication?       YES       NO

If applicable and YES is selected, the fields below are required.

Method of Communication:		
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Communication Dates:		
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Candidates mentioned in/on communication:

Name:	Office/District:
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Name:	Office/District:
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Date Expended:	Amount: \$
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Recipient/Vendor Name:
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Recipient/Vendor Address:
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Purpose/Description:
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Is this Electioneering Communication?	<input type="radio"/> YES	<input type="radio"/> NO
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If applicable and YES is selected, the fields below are required.

Method of Communication:		
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Communication Dates:		
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Candidates mentioned in/on communication:
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Name:	Office/District:
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Name:	Office/District:
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Date Expended:	Amount: \$
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Recipient/Vendor Name:
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Recipient/Vendor Address:
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Purpose/Description:
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Is this Electioneering Communication?	<input type="radio"/> YES	<input type="radio"/> NO
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If applicable and YES is selected, the fields below are required.

Method of Communication:		
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Communication Dates:		
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Candidates mentioned in/on communication:
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Name:	Office/District:
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Name:	Office/District:
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Space Below For Office Use Only

Date Expended:	Amount: \$	
Recipient/Vendor Name:		
Recipient/Vendor Address:		
Purpose/Description:		
Is this Electioneering Communication? <input type="radio"/> YES <input type="radio"/> NO		
If applicable and YES is selected, the fields below are required.		
Method of Communication:		
Communication Dates:		
Candidates mentioned in/on communication:		
Name:	Office/District:	
Name:	Office/District:	

Date Expended:	Amount: \$	
Recipient/Vendor Name:		
Recipient/Vendor Address:		
Purpose/Description:		
Is this Electioneering Communication? <input type="radio"/> YES <input type="radio"/> NO		
If applicable and YES is selected, the fields below are required.		
Method of Communication:		
Communication Dates:		
Candidates mentioned in/on communication:		
Name:	Office/District:	
Name:	Office/District:	