



Brighton

City of Brighton
500 South 4th Avenue
Brighton, CO 80601
303-655-2056

Space Below for Office Use Only



REPORT OF CONTRIBUTIONS AND EXPENDITURES
(1-45-108, C.R.S.)

Full Name of Committee / Person:	Carbaya for Council As shown on Registration
Address of Committee / Person:	306 S 9 th Ave
City, State & Zip Code:	Brighton, CO 80601
Committee Type:	candidate
Name and Address of Financial Institution:	South State Bank

SOS ID NUMBER (state and county committees): N/A

Type of Report:

- Regularly Scheduled Filing
- Amended Filing. This amends previous report filed on _____
- Termination Report. (Termination Reports MUST have a Monetary Balance of Zero in Line 5)
- Check this box if this Report of Contains Electioneering Communications Information

Reporting Period Covered: 10/1/25 through 10/15/25
Date Date

Declared Total Spending (if applicable): \$ ~~833.24~~ 933.24
[Art. XXVIII, Sec. 4(1)]

		Totals Detailed Summary
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 894.14
2	Total Monetary Contributions (Line 11)	\$ 690
3	Total of Monetary Contributions & Beginning Amount (Line 1 + Line 2)	\$ 1584.14
4	Total Monetary Expenditures (Line 19)	\$ 650.90
5	Funds on Hand at the End of Reporting Period (monetary)(Line 3 - Line 4)	\$ 933.24

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: _____

Registered Agent's Signature: _____ Date: _____

Print Candidate Name: Melinda Carbaya

Candidate's Signature: [Signature] Date: 10/17/25

DETAILED SUMMARY

Full Name of Committee / Person: Carbaya for Council

Current Reporting Period: 10/1/25 Through 10/15/25

Funds on Hand at Beginning of Reporting Period (Monetary Only)		\$
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)]	\$ 690.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 0
8	Loans Received (Please list on Schedule "C")	\$ 0
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ 0
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ 0
11	Total Monetary Contributions (Total of Lines 6 through 10)	\$ 690.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 0
13	TOTAL CONTRIBUTIONS (Line 11 + Line 12)	\$ 690.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 933.24
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 0
16	Loan Repayments Made (Please list on Schedule "C")	\$ 0
17	Returned Contributions (To Donor) (Please list on Schedule "D")	\$ 0
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties ONLY)	\$ 0
19	Total Monetary Expenditures (Total of Lines 14 through 17)	\$ 933.24
20	Total Spending (Line 18 + Line 19)	\$ 933.24

SCHEDULE A – ITEMIZED CONTRIBUTIONS STATEMENT (\$20 OR MORE)

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

Full Name of Committee / Person: Carbajal For Council

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/8/25</u>	4. Name (Last, First): <u>Realtor Candidate Political Action</u>
2. Contribution Amount \$ <u>400.00</u>	5. Address: <u>4601 DTC Blvd #100</u>
3. Aggregate Amount * \$ <u>400.00</u>	6. City/State/Zip: <u>Denver, CO 80237</u>
Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, mandatory): <u>NA</u>
	9. Occupation (if applicable, mandatory): <u>NA</u>

Committee

1. Date Accepted <u>10/2/25</u>	4. Name (Last, First): <u>KNISS, Joan</u>
2. Contribution Amount \$ <u>40.00</u>	5. Address: <u>361 Terra Vista St.</u>
3. Aggregate Amount * \$ <u>40.00</u>	6. City/State/Zip: <u>Brighton, CO 80601</u>
Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): <u>Retired</u>

1. Date Accepted	4. Name (Last, First):
2. Contribution Amount \$	5. Address:
3. Aggregate Amount * \$	6. City/State/Zip:
Check box if Electioneering Communication	7. Description: <u>check</u>
	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 A – ITEMIZED CONTRIBUTIONS STATEMENT (\$20 OR MORE)
 [C.R.S. 1-45-108(1)(A)]

Full Name of Committee / Person: _____

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

PLEASE PRINT/TYPE

1. Date Accepted 10/2/25	4. Name (Last, First): Corbett, Sue
2. Contribution Amount \$ 100	5. Address: 808 Poppy Dr.
3. Aggregate Amount * \$ 100	6. City/State/Zip: Brighton, CO 80601
Check box if Electioneering Communication	7. Description: check 1108
	8. Employer (if applicable, mandatory): N/A
	9. Occupation (if applicable, mandatory): Retired

1. Date Accepted 10/2/25	4. Name (Last, First): Lucero, Terrence
2. Contribution Amount \$ 150.00	5. Address: 839 Canary Ln.
3. Aggregate Amount * \$ 150.00	6. City/State/Zip: Brighton, CO 80601
Check box if Electioneering Communication	7. Description: check 41164
	8. Employer (if applicable, mandatory): 27j schools
	9. Occupation (if applicable, mandatory): Exec. Director Operations

1. Date Accepted	4. Name (Last, First): _____
2. Contribution Amount \$	5. Address: _____
3. Aggregate Amount * \$	6. City/State/Zip: _____
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.]

Full Name of Committee / Person: _____

PLEASE PRINT/TYPE

1. Date Expended 10/7/25	4. Name: <u>Dominos Pizza</u>
2. Amount \$ 123.51	5. Address: <u>530 E Bramley Ln #110</u>
3. Recipient is (optional) Committee Non-Committee	6. City/State/Zip: <u>Brighton, CO 80601</u>
	7. Purpose of Expenditure: <u>Community pizza party Colo Park</u> Check Box if Electioneering Communication

1. Date Expended 10/13/25	4. Name: <u>7 AM somewhere</u>
2. Amount \$ 100.00	5. Address: <u>119 N main St.</u>
3. Recipient is (optional) Committee Non-Committee	6. City/State/Zip: <u>Brighton, CO 80601</u>
	7. Purpose of Expenditure: <u>Coffee w/ Corbetts</u> Check Box if Electioneering Communication

1. Date Expended 10/12/25	4. Name: <u>Hip Pops</u>
2. Amount \$ 800	5. Address: <u>3119 W Hampden Ave</u>
3. Recipient is (optional) Committee Non-Committee	6. City/State/Zip: <u>Englewood, CO 80110</u>
	7. Purpose of Expenditure: <u>community festival</u> Check Box if Electioneering Communication

1. Date Expended 10/6/25	4. Name: <u>Good Party</u>
2. Amount \$ 9.73	5. Address: <u>N/A</u>
3. Recipient is (optional) Committee Non-Committee	6. City/State/Zip: <u>N/A</u>
	7. Purpose of Expenditure: <u>campaign website support</u> Check Box if Electioneering Communication

1. Date Expended	4. Name: _____
2. Amount	5. Address: _____
\$	6. City/State/Zip: _____
3. Recipient is (optional) Committee Non-Committee	7. Purpose of Expenditure: _____ Check Box if Electioneering Communication

Statement of Non-Monetary Contributions
 [Art. XXVIII, Sec. 2(5)(a)(II)(III) & Sec. 5(3) & C.R.S. 1-45-108(1)]

Full Name of Committee / Person: _____

PLEASE PRINT/TYPE

<u>1. Date Provided</u>	4. Name (Last, First): _____
<u>2. Fair Market Value</u>	5. Address: _____
\$	6. City, State, Zip: _____
<u>3. Aggregate Amount</u>	7. Purpose: _____
\$	8. Employer (if applicable, <u>mandatory</u>): _____
Check box if Electioneering Communication	9. Occupation (if applicable, <u>mandatory</u>): _____
	10. Check box if Coordinated with a Candidate/Candidate Committee or Political Party

<u>1. Date Provided</u>	4. Name (Last, First): _____
<u>2. Fair Market Value</u>	5. Address: _____
\$	6. City, State, Zip: _____
<u>3. Aggregate Amount</u>	7. Purpose: _____
\$	8. Employer (if applicable, <u>mandatory</u>): _____
Check box if Electioneering Communication	9. Occupation (if applicable, <u>mandatory</u>): _____
	10. Check box if Coordinated with a Candidate/Candidate Committee or Political Party

<u>1. Date Provided</u>	4. Name (Last, First): _____
<u>2. Fair Market Value</u>	5. Address: _____
\$	6. City, State, Zip: _____
<u>3. Aggregate Amount</u>	7. Purpose: _____
\$	8. Employer (if applicable, <u>mandatory</u>): _____
Check box if Electioneering Communication	9. Occupation (if applicable, <u>mandatory</u>): _____
	10. 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."