



Space Below For Office Use Only



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

Full Name of Committee/Person: Forward With Forsyth / Kevin Forsyth
Address of Committee/Person: 1501 Red Clover Ct.
City, State & Zip Code: Brighton, CO 80601
Committee Type: Candidate Committee
Name and Address of Financial Institution: 1st Bank 410 E. Bromley Lane, Brighton, CO 80601

SOS ID NUMBER (state and county committees):

Type of Report

- Regularly Scheduled Filing.
Amended Filing. This amends previous report filed on (date)
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: 10-7-25 Through 10-20-25

Declared Total Spending (if applicable) \$

Table with 2 columns: Description and Totals Detailed Summary Page. Rows include Funds on Hand at the Beginning, Total Monetary Contributions, Total of Monetary Contributions & Beginning Amount, Total Monetary Expenditures, and Funds on Hand at the End of Reporting Period.

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: KEVIN W FORTSYTH
Candidates Signature:
Date: 10/20/2025

DETAILED SUMMARY

Full Name of Committee/Person:

Kevin Forsyth / Forward With Forsyth

Current Reporting Period:

10-7-25

Through

10-20-25

Funds on hand at the beginning of reporting period (Monetary Only)		\$ <u>0</u>
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 921.01 ^{kr} <u>921.01</u>
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 921.01 ^{kr} <u>—</u>
8	Loans Received (Please list on Schedule "C")	\$ <u>—</u>
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ <u>—</u>
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ <u>53.58</u>
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 921.01 ^{kr} <u>974.59</u>
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ <u>6.25</u>
13	Total Contributions (Line 11 + line 12)	\$ 921.01 ^{kr} <u>980.84</u>
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ <u>886.01</u>
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ <u>38.50</u>
16	Loan Repayments Made (Please list on Schedule "C")	\$ <u>—</u>
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ <u>—</u>
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ <u>—</u>
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ <u>924.51</u>
20	Total Spending (Line 18 + line 19)	\$ <u>924.51</u>

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

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

Full Name of Committee/Person: Kevin Forsyth / Forward With Forsyth

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10-15	4. Name (Last, First): <u>Saxton, Cori</u>
2. <u>Contribution Amt.</u> \$ 35	5. Address: <u>219 S. Elm Ave.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Brighton, CO 80601</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>venmo</u>
	8. Employer (if applicable, mandatory): <u>none</u>
	9. Occupation (if applicable, mandatory): <u>unemployed</u>

1. <u>Date Accepted</u> 10-9-25	4. Name (Last, First): <u>Forsyth, Lara</u>
2. <u>Contribution Amt.</u> \$ 173.	5. Address: <u>1581 Red Clover Ct.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Brighton, CO 80601</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Card</u>
	8. Employer (if applicable, mandatory): <u>FHC</u>
	9. Occupation (if applicable, mandatory): <u>RN</u>

1. <u>Date Accepted</u> 10-17-25	4. Name (Last, First): <u>Forsyth, Kevin</u>
2. <u>Contribution Amt.</u> \$ 428.25	5. Address: <u>1581 Red Clover Ct.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Brighton, CO 80601</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Card</u>
	8. Employer (if applicable, mandatory): <u>Bio One Denver</u>
	9. Occupation (if applicable, mandatory): <u>Operations Manager</u>

1. <u>Date Accepted</u> 10-10-25	4. Name (Last, First): <u>Forsyth, Kevin</u>
2. <u>Contribution Amt.</u> \$ 75	5. Address: <u>1581 Red Clover Ct.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Brighton, CO 80601</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>electronic</u>
	8. Employer (if applicable, mandatory): <u>Bio One Denver</u>
	9. Occupation (if applicable, mandatory): <u>Operations Manager</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)

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

Full Name of Committee/Person: Forward With Forsyth / Kevin Forsyth

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10-28-25	4. Name (Last, First): <u>Forsyth, Lara</u>
2. <u>Contribution Amt.</u> \$ 124.38	5. Address: <u>1581 Red Clover Ct.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Brighton, CO 80601</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Card</u>
	8. Employer (if applicable, mandatory): <u>IHC</u>
	9. Occupation (if applicable, mandatory): <u>RN</u>

1. <u>Date Accepted</u> 10-14-25	4. Name (Last, First): <u>Forsyth, Lara</u>
2. <u>Contribution Amt.</u> \$ 90.38	5. Address: <u>1581 Red Clover Ct.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Brighton, CO 80601</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Card</u>
	8. Employer (if applicable, mandatory): <u>IHC</u>
	9. Occupation (if applicable, mandatory): <u>RN</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.]

Full Name of Committee/Person: Kevin Forsyth/Forward With Forsyth

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 10-17-25	4. Name: <u>Flutterby Gives</u>
2. <u>Amount</u> \$ <u>25</u>	5. Address: <u>9737 Wadsworth Pkwy</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>Chili cookoff entrance</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10-9-25	4. Name: <u>Home Depot</u>
2. <u>Amount</u> \$ <u>173.</u>	5. Address: <u>2440 Buckley Rd</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Brighton, CO 80601</u>
	7. Purpose of Expenditure: <u>Sign poles, bungees, zip ties</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10-10-25	4. Name: <u>Susie Use</u>
2. <u>Amount</u> \$ <u>75</u>	5. Address: <u>284 N. 17th Ct. Brighton</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Brighton, CO 80601</u>
	7. Purpose of Expenditure: <u>Website work</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10-13-25	4. Name: <u>GoDaddy</u>
2. <u>Amount</u> \$ <u>124.38</u>	5. Address: <u>Internet site</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>Website Provider</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10-14-25	4. Name: <u>Home Depot</u>
2. <u>Amount</u> \$ <u>90.38</u>	5. Address: <u>2440 Buckley Rd.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Brighton, CO 80601</u>
	7. Purpose of Expenditure: <u>fall sign poles</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.]

Full Name of Committee/Person: Kevin Forsyth/Forward With Forsyth

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 10-18	4. Name: <u>Flutterby Gives</u>
2. <u>Amount</u> \$ 15.00	5. Address: <u>9737 Wadsworth Plwy</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>additional chili cookoff fee</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10-17-25	4. Name: <u>Office Depot</u>
2. <u>Amount</u> \$ 28.20	5. Address: <u>2433 Prairie Center Plwy</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Brighton, CO 80601</u>
	7. Purpose of Expenditure: <u>Stamp</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10-17-25	4. Name: <u>Costco</u>
2. <u>Amount</u> \$ 281.16	5. Address: <u>16375 Washington St.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Thornton, CO 80023</u>
	7. Purpose of Expenditure: <u>chili cookoff supplies</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10-17-25	4. Name: <u>Walmart</u>
2. <u>Amount</u> \$ 73.89	5. Address: <u>40 W. Browning Lane</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Brighton, CO 80601</u>
	7. Purpose of Expenditure: <u>chili cookoff supplies</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

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: Kevin Forsyth / Forward With Forsyth

Returned Contributions

(Previously reported on Schedule A – Contributions accepted and then returned to donors)

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10-14-25	4. Name (Last, First): <u>Home depot</u>
2. <u>Date Returned</u> 10-14-25	5. Address: <u>2440 Buckley Rd.</u>
3. <u>Amount</u> \$ <u>57.58</u>	6. City/State/Zip: <u>Brighton, CO 80601</u>
	7. Purpose: <u>returning short sign stakes</u>

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: Kevin Forsyth / Forward With Forsyth

PLEASE PRINT/TYPE

1. <u>Date Provided</u> 10-17-25	4. Name (Last, First): <u>office depot</u>
2. <u>Fair Market Value</u> \$ 6.25	5. Address: <u>2433 Prairie Center Parkway</u>
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: <u>Brighton, CO 80601</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>ink for stickers - did not charge because we bought stickers there.</u>
	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."