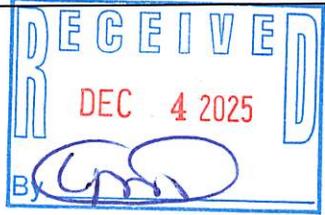




City of Brighton
 500 South 4th Avenue
 Brighton, CO 80601
 303-655-2056

Space Below for Office Use Only



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

Full Name of Committee / Person:	Carbajal for Council As shown on Registration
Address of Committee / Person:	866 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: 10/16/25 Date through 12/2/25^{MC} Date

Declared Total Spending (if applicable): \$ 913.06
 [Art. XXVIII, Sec. 4(1)]

		Totals Detailed Summary
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 650.90
2	Total Monetary Contributions (Line 11)	\$ 262.16
3	Total of Monetary Contributions & Beginning Amount (Line 1 + Line 2)	\$ 913.06
4	Total Monetary Expenditures (Line 19)	\$ 913.06
5	Funds on Hand at the End of Reporting Period (monetary)(Line 3 - Line 4)	\$ 0

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 Carbajal

Candidate's Signature: [Signature] Date: 12/2/25

DETAILED SUMMARY

Full Name of Committee / Person: Carbajal for Council

Current Reporting Period: 10/16/25 Through 12/4/25

Funds on Hand at Beginning of Reporting Period (Monetary Only)		\$ 650.90
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)]	\$ 262.16
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)	\$ 262.16
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 0
13	TOTAL CONTRIBUTIONS (Line 11 + Line 12)	\$ 262.16
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 913.06
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)	\$ 913.06
20	Total Spending (Line 18 + Line 19)	\$ 913.06

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

<u>1. Date Accepted</u> 11/14/10 11/14/25 mc	4. Name (Last, First): <u>Carbaja, Melinda</u>
<u>2. Contribution Amount</u> \$ <u>262.16</u>	5. Address: <u>266 S 9th Ave</u>
<u>3. Aggregate Amount *</u> \$	6. City/State/Zip: <u>Brighton, CO 80601</u>
Check box if Electioneering Communication	7. Description: <u>self-cover remaining expenses</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>self</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>CEO</u>

King Sapper
/ Good
Party

<u>1. Date Accepted</u>	4. Name (Last, First): _____
<u>2. Contribution Amount</u> \$	5. Address: _____
<u>3. Aggregate Amount *</u> \$	6. City/State/Zip: _____
Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

<u>1. Date Accepted</u>	4. Name (Last, First): _____
<u>2. Contribution Amount</u> \$	5. Address: _____
<u>3. Aggregate Amount *</u> \$	6. City/State/Zip: _____
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: Carbajal for Council
PLEASE PRINT/TYPE

1. Date Expended <u>11/3/25</u>	4. Name: <u>Good Party LLC</u>
2. Amount \$ <u>16.02</u>	5. Address: _____
3. Recipient is (optional) Committee Non-Committee	6. City/State/Zip: <u>CA</u>
	7. Purpose of Expenditure: <u>text/call</u> Check Box if Electioneering Communication

1. Date Expended <u>11/3/25</u>	4. Name: <u>City of Brighton</u>
2. Amount \$ <u>20.00</u>	5. Address: <u>4th Ave</u>
3. Recipient is (optional) Committee Non-Committee	6. City/State/Zip: <u>Brighton, CO 80601</u>
	7. Purpose of Expenditure: <u>public records request</u> Check Box if Electioneering Communication

1. Date Expended <u>11/7/25</u>	4. Name: <u>Hippers</u>
2. Amount \$ <u>327.56</u>	5. Address: _____
3. Recipient is (optional) Committee Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>xtra pps for winter fest</u> Check Box if Electioneering Communication

1. Date Expended <u>11/12/25</u>	4. Name: <u>Something Brewery</u>
2. Amount \$ <u>246.00</u>	5. Address: <u>17 n main st</u>
3. Recipient is (optional) Committee Non-Committee	6. City/State/Zip: <u>Brighton, CO</u>
	7. Purpose of Expenditure: <u>watch event</u> Check Box if Electioneering Communication

1. Date Expended <u>11</u>	4. Name: <u>South State Bank</u>
2. Amount \$ <u>2.00</u>	5. Address: _____
3. Recipient is (optional) Committee Non-Committee	6. City/State/Zip: <u>Brighton, CO 80601</u>
	7. Purpose of Expenditure: <u>paper fee</u> 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: _____

PLEASE PRINT/TYPE

1. Date Expended <u>10/24/25</u>	4. Name: <u>Good Party LLC</u>
2. Amount \$ <u>32.29</u>	5. Address: _____
3. Recipient is (optional) Committee Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>data/text</u> Check Box if Electioneering Communication

1. Date Expended <u>11/4/25</u>	4. Name: <u>King Soupers</u>
2. Amount \$ <u>219.19</u>	5. Address: <u>520 N 4th Ave</u>
3. Recipient is (optional) Committee Non-Committee	6. City/State/Zip: <u>Brighton, CO 80601</u>
	7. Purpose of Expenditure: <u>food for event 11/4</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

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

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

SCHEDULE C – LOANS

Full Name of Committee / Person: _____

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: _____

Total of All Loans This Reporting:

Loan Amount Received This Reporting Period: \$ 0 Period: \$ 0
(Place on line 8 of Detailed Summary Report)

Principal Amount Paid This Reporting Period: \$ 0

Interest Amount Paid This Reporting Period: \$ 0

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: \$ 0

TERMS OF LOAN: _____
Date Loan Received _____ Due Date for Final Payment _____

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

<u>Full Name</u>	<u>Address, City, State, Zip</u>	<u>Amount Guaranteed</u>

SCHEDULE D – RETURNED CONTRIBUTIONS & EXPENDITURES

Full Name of Committee/Person: Carbajal For Council

Returned Contributions

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

PLEASE PRINT/TYPE

<u>1. Date Accepted</u>	4. Name (Last, First): <u>N/A</u>
<u>2. Date Returned</u>	5. Address: _____
<u>3. Amount</u>	6. City, State, Zip: _____
\$	7. Purpose: _____

<u>1. Date Accepted</u>	4. Name (Last, First): _____
<u>2. Date Returned</u>	5. Address: _____
<u>3. 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

<u>1. Date Expended</u>	4. Name (Last, First): _____
<u>2. Date Returned</u>	5. Address: _____
<u>3. Amount</u>	6. City, State, Zip: _____
\$	7. Purpose: _____

<u>1. Date Expended</u>	4. Name (Last, First): _____
<u>2. Date Returned</u>	5. Address: _____
<u>3. Amount</u>	6. City, State, Zip: _____
\$	7. Purpose: _____