



COLORADO
Department of Revenue
Marijuana Enforcement Division

1697 Cole Blvd., Suite 200
Lakewood, CO 80401

December 14, 2022

David Gray Salturelli

License Type: Owner- Social Equity
License # M148575

Dear David Gray Salturelli,

The purpose of this correspondence is to inform you that on December 14, 2022 you were found suitable as an Owner-SE per Rule 2-220(C)(2) to be a Controlling Beneficial Owner in any business licensed by the Marijuana Enforcement Division (MED). You are now eligible to apply for an ownership interest or a position of control in a Colorado marijuana establishment.

To join the ownership of an existing Colorado Regulated Marijuana Business, the owner(s) of the existing establishment/business are required to submit this letter of suitability, a Regulated Marijuana Business License Change of Controlling Beneficial Owner application, supporting documents and applicable fees to the MED for approval. If you wish to open and operate a new Colorado Regulated Marijuana Business, you must submit a complete Regulated Marijuana Business License application, accompanied with all applicable fees and all supporting documents, along with this letter of suitability. To assume a position as an Executive officer or Member of a Board of Directors that control a Regulated Marijuana Business, the business must submit a Changes Exempt from a Change of Owner Application Disclosure accompanied with all applicable fees and supporting documents.

Pursuant to Rule 2-235 - Suitability (H), this Finding of Suitability is valid for one year. If more than 365 days passes from the issuance of this Finding of Suitability and you have not applied to become a Controlling Beneficial Owner (including as an Executive Officer or Board of Director member) of a Regulated Marijuana Business pursuant to (1) an initial business license application or (2) a change of owner application, this initial Finding of Suitability will automatically expire without notification.

Sincerely,

Dominique Mendiola
Senior Director

Colorado Marijuana Enforcement Division**Natural Person – Finding of Suitability Application Instructions****APPLICATION CHECKLIST** **1 Application Type**

Owner: Any Natural Person who holds 10% interest or more of the Owner's interest of a RMB; Executive Officer, Manager or any other Person or affiliate that is otherwise in a position to execute Control of the RMB.

 2 Application Fully Completed

Type or clearly print, in English, an answer to every question. If a question does not apply, indicate with an N/A. If the available space is insufficient, continue on a separate sheet and precede each answer with the appropriate title. Sign and date the application. **Attach a copy of your Real ID compliant state issued or Government ID (i.e. passport) or driver's license.**

Notice: You are required by state law to provide your social security number. If you do not have a social security number, you must complete a sworn statement stating you do not have a social security number.

 3 Application Contents

- Disclosure Requirements
- Main Application
- Authorization Forms
- Fingerprint Verification Form
- IdentoGo Instructions

The disclosure requirements and the main application must be completed in full by all applicants.

 4 All Forms Signed and Attached

The following accompanying forms must be completed, signed and returned with the application:

- Affidavit- Restrictions on Public Benefits
- Affirmation and Consent
- Tax Check Authorization and Request to Release Information
- Investigation Authorization / Authorization to Release Information
- Applicant's Request to Release Information
- Affirmation of Eligibility for Social Equity License

 5 Required Disclosures

- See Suitability Required Disclosures (page 1 of application)**
- Upon request by the Division, an applicant must provide additional information or documents required to process and investigate the application, within seven (7) days of the request.
Please note: This deadline may be extended for a period of time commensurate with the scope of the request.

 6 Application and License Fees

All applications and documentation submitted must be single-sided and on 8.5x11 inch paper.

See fee table on website: SBG.Colorado.gov/MarijuanaEnforcement

Application fees remitted to the State Licensing Authority and/or the Department of Revenue are non-refundable.

- Submit complete application packet.
- Checks (in the name of the applicant or applicants attorney's trust account), money orders and major credit cards (subject to service charge).
- Mail-in applications can only be paid by check or money order

 7 Application Submittal

Applications can be submitted in person or by mail with all attachments and requisite fees to:

Marijuana Enforcement Division
1697 Cole Blvd., Suite 200
Lakewood, CO 80401
ATTN: Business Licensing

NOTE: Incomplete applications will not be processed. Applicants must collect the incomplete application and fees (including those mailed in or delivered via courier), from the Lakewood Office prior to the end of the next business day.

DR 8520 (02/04/22)

Suitability Required Disclosures

What type of application will this suitability be associated with?

- New Business (All required Findings of Suitability must first be obtained prior to any new business application submission).
- Change of Ownership with license # _____
(Applications for Finding of Suitability associated with Change of Ownership applications must be submitted at the same time).
- Change of Ownership Exemption with license # _____
- Social Equity Program

Provide 180 days of account statements used to acquire ownership or proof of ownership, for 180 days, of other assets being used to secure ownership interest.

Provide a copy of a Real ID compliant State issued or Government ID (state issued Driver's License, state issued ID or Government issued passport)

Fingerprint information (see instructions provided in the application)

Glossary of Terms:

RMB - Regulated Marijuana Business

PBO - Passive Beneficial Owner

QII - Qualified Institutional Investor

PTC - Publicly Traded Company

CBO - Controlling Beneficial Owner

IFIH - Indirect Financial Interest Holder

QPF - Qualified Private Fund

Pursuant to section 44-10-305(4), C.R.S., prior to submitting an application for a license, registration or permit, the applicant needs to be aware that having a medical marijuana or retail marijuana license and working in the medical marijuana or retail marijuana industry may have adverse federal immigration consequences.

Affirmation of complete application

Signature

MUST BE SIGNED IN
AT PRO OR READER

REQUIRED

Printed Name

David Salturelli

Date (MMDDYYYY)

10/06/2022

9247EPCEA02348D...

DR 8520 (02/04/22)
 COLORADO DEPARTMENT OF REVENUE
 Marijuana Enforcement Division
 SBG.Colorado.gov/MarijuanaEnforcement

Marijuana License Number (Leave Blank)

Natural Person Finding of Suitability Application Form

Why are you applying? (Check one of the following):							
<input type="checkbox"/> CBO	<input type="checkbox"/> PBO	<input type="checkbox"/> Executive Officer	<input checked="" type="checkbox"/> Social Equity CBO	<input type="checkbox"/> Manager	<input type="checkbox"/> Reasonable Cause		
Position Held Member							
Applicant's Last Name (Please Print) Salturelli			First Name (Please Print) David			Full Middle Name Gray	
Maiden/Married Names Used (Full Name) (Attach separate sheet if necessary) N/A				Nicknames, Aliases, Etc. Used (Full Name) (Attach separate sheet if necessary) N/A			
Gender <input checked="" type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> X		Race <input type="checkbox"/> Asian <input type="checkbox"/> Mixed Race <input type="checkbox"/> Black <input type="checkbox"/> Native American <input checked="" type="checkbox"/> Caucasian <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Undisclosed/Unknown					
Date of Birth (MMDDYYYY)		Social Security Number		Government Issued ID & Jurisdiction			
Place of Birth: City				State/Prov	Country USA		
Physical Appearance ⇨		Height (in feet & inches)	Weight (in pounds)	Hair Color		Eye Color	
U.S. Citizen <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		*If "No", List Country of Citizenship					
Physical Address							
Address (include unit or apartment number)			City		County	State/Prov	ZIP
Length of time at this Address:		Home Phone Number		Cell Phone Number		Email Address	
Year(s) 1	Month(s) 1						
Mailing Address (if different from Physical Address)							
Address (include unit or apartment number)				City		State/Prov	ZIP
Name of Marijuana Business Associated with Igadl, Ltd.				Marijuana Business Phone Number		Marijuana Business Contact Name David Michel	
Marijuana Business Address 4891 Independence St., Ste. 270				City Wheat Ridge		State CO	ZIP 80033
Applicant's Signature				DocuSigned by: -ORM MUST BE SIGNED IN ADOBE PRO OR READER		Date (MMDDYYYY) 10/06/2022	

9247EFCFA02349D...

Applicant's Last Name (Please Print) Salturelli	First Name (Please Print) David	Full Middle Name Gray
--	------------------------------------	--------------------------

NOTICE: The Finding of Suitability Application Form is an official document. If you provide false information on your marijuana license application and/or do not disclose all information the application asks, your license is subject to denial, and you may be subject to criminal prosecution. The Marijuana Enforcement Division will conduct a complete background investigation and will check all sources of information.

1. Have you been convicted of a felony in the 3 years immediately preceding this application? (Unless charge was prior to age 18 and was adjudicated as a juvenile)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. Are you currently subject to a sentence for a felony conviction, including probation, parole or a deferred judgment? (Unless charge was prior to age 18 and was adjudicated as a juvenile)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Have you failed to remedy an outstanding delinquency for any judgments, taxes, interest or penalties due to the Department of Revenue, relating to a Regulated Marijuana Business?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Are you a licensed Physician making marijuana patient recommendations? (Medical Only)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. Have you had your authority to act as a primary caregiver revoked by the State Health Agency? (Medical Only)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6. Are you under 21 years of age at the time of this application?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
7. Are you a sheriff, deputy sheriff, police officer, or prosecuting officer, or an officer or employee with the marijuana state licensing authority or a local licensing authority?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. Are you a Person that is a "Bad Actor" under rule 506(d) promulgated pursuant to the Federal "Securities Act of 1933", as amended and subject to 17CFR230.506(d)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
9. Are you a person that is prohibited from engaging in transactions pursuant to this Article 10, due to its designation on the "Specially Designated Nationals and Block Person" list maintained by the Federal Office of Foreign Assets Control?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No


I have thoroughly read and understand the questions above, and understand that I cannot hold a Colorado Marijuana license if I answered "Yes" to any of the questions above.

Applicant's Signature	DocuSigned by: I MUST BE SIGNED IN ACROBAT PRO OR READER REQUIRED	Date (MMDDYYYY) 10/06/2022
-----------------------	---	-------------------------------

9247EFCFA02349D...

Applicant's Last Name (Please Print) Salturelli	First Name (Please Print) David	Full Middle Name Gray
Licensing		
1. Provide a list of any privileged or professional licenses, with license numbers, you have held within the last three (3) years prior to the submission of the Finding of Suitability Application. List those that were issued by the Colorado Department of Revenue or the Department of Regulatory Agencies, including all marijuana licenses.		<input type="checkbox"/> None
M20955		
2. Have you or any business entity owned by you, ever owned or applied for a Marijuana license in this or any other jurisdiction, foreign or domestic? a. If so, have you ever been subject to any of the following actions: (1) denial; (2) surrender; (3) order to show cause; (4) suspension; (5) revocation; (6) stipulation or settlement. If YES, provide details on a separate sheet, including jurisdiction, type of action, and date of action.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Do you now own, have ever owned, or otherwise derive(d) a benefit from assets held outside the United States (other than Canada)?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Has a complaint, judgment, consent decree, settlement or other disposition related to a violation of federal, state or similar foreign security law or regulation ever been filed or entered against you or a business entity? If YES, explain on a separate sheet of paper.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. Have you or are you involved in a civil lawsuit in regards to a marijuana business? If YES, provide details on a separate piece of paper.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6. List any sanctions, penalties, assessments, or cease and desist orders imposed by any securities regulatory agency, other than the United States Securities and Exchange Commission. (Provide on a separate sheet.)		
Criminal History (DO NOT DISCLOSE CRIMINAL HISTORY WHERE NON-CONVICTION RECORD HAS BEEN SEALED OR EXPUNGED)		
1. In the last 3 years have you been arrested, served with a criminal summons, charged with, or convicted of ANY felony in this or any other country? • You must include ALL felony arrests, charges, and convictions in the last 3 years (unless charge was prior to age 18 and was adjudicated as a juvenile), regardless of the outcome, even if the charges were dismissed or you were found not guilty. • NOTICE: Do not rely upon your understanding that an arrest or charge is "not supposed to be on your record." A criminal record was not cleared, erased, sealed, pardoned or expunged unless you were given, and have in your possession, a written order from a judge directing that action.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
*If you answered YES, explain in detail on the next page of this application, using additional sheets as necessary. For each FELONY offense for which you were arrested or charged, YOU MUST OBTAIN OFFICIAL DOCUMENTATION FROM THE COURT WHERE YOU APPEARED, SHOWING THE FINAL DISPOSITION (OUTCOME) OF YOUR CASE (FELONIES ONLY) . This information will include whether you were found guilty or not guilty and the penalty (money fine, time in jail or prison, probation or deferred sentence). If you received a deferred judgment, a deferred sentence, or probation, your documentation must include the date that you were discharged or released from probation or other supervision.		

Applicant's Initials



Applicant's Last Name (Please Print) Salturelli	First Name David	Full Middle Name Gray
--	---------------------	--------------------------

Arrest Disclosure Form

In the last 3 years have you been arrested, served a criminal summons, charged with, or convicted of a FELONY (unless charge was prior to age 18 and was adjudicated as a juvenile)? If so, you must disclose this information to the Marijuana Enforcement Division.

Any person applying to be licensed by the Marijuana Enforcement Division must make notification to the Division of any felony criminal conviction and/or felony criminal charge pending against such person.

Failure to disclose may result in disciplinary action, up to and including the denial of your license application.

Please List Each Felony Offense Separately

1	Date of Offense (MMDDYYYY)	Place of Offense N/A
Arresting Agency		
Original Charge		
Disposition Narrative (i.e. guilty, not guilty, probation, etc.) — Must also provide official documentation (felonies only).		
2	Date of Offense (MMDDYYYY)	Place of Offense
Arresting Agency		
Original Charge		
Disposition Narrative (i.e. guilty, not guilty, probation, etc.) — Must also provide official documentation (felonies only).		
3	Date of Offense (MMDDYYYY)	Place of Offense
Arresting Agency		
Original Charge		
Disposition Narrative (i.e. guilty, not guilty, probation, etc.) — Must also provide official documentation (felonies only).		
4	Date of Offense (MMDDYYYY)	Place of Offense
Arresting Agency		
Original Charge		
Disposition Narrative (i.e. guilty, not guilty, probation, etc.) — Must also provide official documentation (felonies only).		
Signature (Required even if no criminal history)		DocuSigned by: Date (MMDDYYYY) 10/06/2022

9247EFC6A02348B...

Applicant's Last Name (Please Print) Salturelli	First Name David	Full Middle Name Gray
Financial History		
If known, please submit all executed agreements or documents that grant you any right to any percent of ownership or percent of income from the Colorado Marijuana business with which you are associated.		
1. Amount to otherwise be invested or loaned in business:	\$	0
2. Percentage of ownership this amount represents:		20 %
3. Investment will be derived from the following sources: Personal Income		
4. Has your interest in this Marijuana establishment been assigned, pledged or hypothecated to any person, firm, or corporation, or has any agreement been entered into whereby your interest is to be assigned, pledged or sold, either in part or whole?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If YES, explain:		

Income		
Annual Income		
Name of employer (Please provide 6 mos of pay stubs.):		
	lgadl	
Salary (Source):	lgadl, Ltd	\$
Salary (Source):		\$
Interest (Source):		\$
Interest (Source):		\$
Dividends (Source):		\$
Dividends (Source):		\$
Other (Source):	Elevated Holdings, LLC	\$
Other (Source):		\$
	Total	\$


 Applicant's Initials _____



Affidavit - Restrictions On Public Benefits

I, David Salturelli, swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

- I am a United States citizen.
- I am not a United States citizen but I am a Permanent Resident of the United States.
- I am not a United States citizen but I am lawfully present in the United States pursuant to Federal law.
- I am a foreign national not physically present in the United States.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Signature	DocuSigned by: TH- ST BE SIGNED IN ACROBAT PRO OR READER 9247EFCFA02349D...	Date (MMDYYYY) REQUIRED 10/06/2022
-----------	---	--

Affirmation & Consent

I, David Salturelli, state under penalty for offering a false instrument for recording pursuant to 18-5-114 C.R.S. that the entire Natural Person Finding of Suitability Application Form, statements, attachments, and supporting schedules are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that misrepresentation or failure to reveal information requested may be deemed sufficient cause for the refusal to issue a Marijuana license by the State Licensing Authority. Further, I am aware that later discovery of an omission or misrepresentation made in the above statements may be grounds for the denial of the Marijuana application. I am voluntarily submitting this application to the Colorado Marijuana Licensing Authority under oath with full knowledge that I may be charged with perjury or other crimes for intentional omissions and misrepresentations pursuant to Colorado law or for offering a false instrument for recording pursuant to 18-5-114 C.R.S. I further consent to any background investigation necessary to determine my present and continuing suitability and that this consent continues as long as I hold a Colorado Marijuana license.

Note: If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your banking account electronically.

Print Full Legal Name of Applicant clearly below:

Last Name of Applicant (Please Print) Salturelli	First Name of Applicant David	Middle Name of Applicant Gray
Signature Salturelli	DocuSigned by: THIS PAGE BE SIGNED IN ADOBE ACROBAT PRO OR READER	Date (MMDDYYYY) 10/06/2022

Confidential Document: This document is the property of the Colorado Marijuana State Licensing Authority and the Colorado Marijuana Enforcement Division, and is provided for Official Use Only. This document may not be further reproduced nor its contents disclosed without the written permission of the Division or State Licensing Authority.

Tax Check Authorization and Request To Release Information

I David Salturelli am signing this waiver on behalf of David Salturelli (the "Applicant/Licensee") to permit the Colorado Department of Revenue and any other state or local taxing authority to release information and documents that would otherwise be confidential. If I am signing this waiver for someone other than myself, I certify that I have the authority to execute this waiver on behalf of the Applicant/Licensee.

The information and documentation obtained pursuant to this waiver will be used in connection with the Applicant/Licensee's application or licensure with the Colorado Marijuana Enforcement Division, which requires proof of compliance with certain tax obligations pursuant to several statutory provisions, including sections 44-10-202(1) and 44-10-307(1)(e), C.R.S. This waiver is made pursuant to section 39-21-113(4), C.R.S.; and any other similar law or ordinance concerning the confidentiality of tax returns and return information. This waiver shall be valid while the application is pending and, if the application is approved, (1) for one year from the date of licensure or; (2) if applying for an employee license under the medical marijuana code, for two years from the date of licensure. If the license is administratively continued pursuant to section 44-10-314, C.R.S., this waiver shall be valid until the state licensing authority takes final action to approve or deny the renewal of the license. Applicant/Licensee agrees to execute a new waiver for each subsequent licensing period in connection with the renewal of any license.

Applicant/Licensee requests that the Colorado Department of Revenue and any other state or local taxing authority release the following information and supporting documentation to the Colorado Marijuana Enforcement Division, which is acting as Applicant's/Licensee's duly authorized representative under section 39-21-113(4), C.R.S., solely to obtain the information specified below.

1. Whether the Applicant/Licensee has failed to file any state tax return with the Colorado Department of Revenue or any other state or local taxing authority by the required due date (determined with regard to any extension(s) of time for filing) for any tax year for which filing of a return might have been required.
2. Whether the Applicant/Licensee has failed to pay any tax, penalty, or interest liability within 30 days of the date on which the Colorado Department of Revenue or any other state or local taxing authority gave notice of the amount due and requested payment.
3. Whether the Applicant/Licensee has entered into a payment plan with the Colorado Department of Revenue or any other state or local taxing authority and whether Applicant/Licensee is current on any payments required by said payment plan.

Applicant/Licensee authorizes the Colorado Department of Revenue and any other state or local taxing authority to release any additional information or documentation necessary to answer the questions above. Applicant/Licensee authorizes the Colorado Marijuana Enforcement Division and its legal representatives to use the information and documentation obtained from the Colorado Department of Revenue and any other state or local taxing authority in any administrative action regarding the application or license. To assist the Colorado Department of Revenue and any other state or local taxing authority locate the tax records, Applicant/Licensee is voluntarily providing the following information (please type or print).

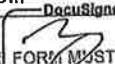
Applicant's Name (Individual/Business) David Salturelli / Igadl, Ltd.		Social Security Number/Tax Identification Number	
Street Address	City	State	Zip Code
Home Telephone Number	Business/Work Telephone Number		
Legal Last Name (Please Print) Salturelli	Legal First Name David	Full Middle Name Gray	
Applicant's Signature THIS F...	DocuSigned by: REQUIRED		Date (MMDDYYYY) 10/06/2022

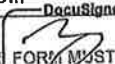
Investigation Authorization/Authorization to Release Information

I, David Salturelli, hereby authorize the Colorado Marijuana Licensing Authority, the Marijuana Enforcement Division, (hereafter, the Investigatory Agencies) to conduct a complete investigation into my personal background, using whatever legal means they deem appropriate. I hereby authorize any person or entity contacted by the Investigatory Agencies to provide any and all such information deemed necessary by the Investigatory Agencies. I hereby waive any rights of confidentiality in this regard. I understand that by signing this authorization, a financial record check may be performed. I authorize any financial institution to surrender to the Investigatory Agencies a complete and accurate record of such transactions that may have occurred with that institution, including, but not limited to, internal banking memoranda, past and present loan applications, financial statements and any other documents relating to my personal or business financial records in whatever form and wherever located. I authorize the release of this type of information, even though such information may be designated as "confidential" or "nonpublic" under the provisions of state or federal laws. I understand that by signing this authorization, a criminal history check will be performed. I authorize the Investigatory Agencies to obtain and use from any source, any information concerning me contained in any type of criminal history record files, wherever located. I understand that the criminal history record files contain records of arrests which may have resulted in a disposition other than a finding of guilt (i.e., dismissed charges, or charges that resulted in a not guilty finding). I understand that the information may contain listings of charges that resulted in suspended imposition of sentence, even though I successfully completed the conditions of said sentence and was discharged pursuant to law. I authorize the release of this type of information, even though this record may be designated as "confidential" or "nonpublic" under the provisions of state or federal laws.

The Investigatory Agencies reserve the right to investigate all relevant information and facts to their satisfaction. I understand that the Investigatory Agencies may conduct a complete and comprehensive investigation to determine the accuracy of all information gathered. However, the State of Colorado, Investigatory Agencies, and other agents or employees of the State of Colorado shall not be held liable for the receipt, use, or dissemination of inaccurate information. I, on behalf of the applicant, its legal representatives, and assigns, hereby release, waive, discharge, and agree to hold harmless, and otherwise waive liability as to the State of Colorado, Investigatory Agencies, and other agents or employees of the State of Colorado for any damages resulting from any use, disclosure, or publication in any manner, other than a willfully unlawful disclosure or publication, of any material or information acquired during inquiries, investigations, or hearings, and hereby authorize the lawful use, disclosure, or publication of this material or information. Any information contained within my application, contained within any financial or personnel record, or otherwise found, obtained, or maintained by the Investigatory Agencies, shall be accessible to law enforcement agents of this or any other state, the government of the United States, or any foreign country.


Print Full Legal Name of Owner clearly below:

Applicant's Legal Business Name <p style="text-align: center;">lgadl, Ltd.</p>		Trade Name (DBA) <p style="text-align: center;">lgadl</p>	
Last Name of Owner (Please Print) <p style="text-align: center;">Salturelli</p>		First Name of Owner <p style="text-align: center;">David</p>	Middle Name of Owner <p style="text-align: center;">Gray</p>
Signature 		Date (MMDDYYYY) <p style="text-align: center;">10/06/2022</p>	REQUIRED

DocuSigned by:  THIS FORM MUST BE SIGNED IN ADOBE ACROBAT PRO OR READER

Confidential Document: This document is the property of the Colorado Marijuana State Licensing Authority and the Colorado Marijuana Enforcement Division, and is provided for Official Use Only. This document may not be further reproduced nor its contents disclosed without the written permission of the Division or State Licensing Authority.

Applicant's Request to Release Information

TO: (Leave this Blank)	FROM: (Applicant's Printed Name) David Salturelli	
<ol style="list-style-type: none"> 1. I hereby authorize and request all persons to whom this request is presented having information relating to or concerning the above named applicant to furnish such information to a duly appointed agent of the Marijuana Enforcement Division whether or not such information would otherwise be protected from the disclosure by any constitutional, statutory or common law privilege. 2. I hereby authorize and request all persons to whom this request is presented having documents relating to or concerning the above named applicant to permit a duly appointed agent of the Marijuana Enforcement Division to review and copy any such documents, whether or not such documents would otherwise be protected from disclosure by any constitutional, statutory, or common law privilege. 3. If the person to whom this request is presented is a brokerage firm, bank, savings and loan, or other financial institution or an officer of the same, I hereby authorize and request that a duly appointed agent of the Marijuana Enforcement Division be permitted to review and obtain copies of any and all documents, records or correspondence pertaining to me, including but not limited to past loan information, notes co-signed by me, checking account records, savings deposit records, safe deposit box records, passbook records, and general ledger folio sheets. 4. I do hereby make, constitute, and appoint any duly appointed agent of the Colorado Marijuana Enforcement Division, my true and lawful attorney in fact for me in my name, place, stead, and on my behalf and for my use and benefit: <ol style="list-style-type: none"> (a) To request, review, copy sign for, or otherwise act for investigative purposes with respect to documents and information in the possession of the person to whom this request is presented as I might; (b) To name the person or entity to whom this request is presented and insert that person's name in the appropriate location in this request: (c) To place the name of the agent presenting this request in the appropriate location on this request. 5. I grant to said attorney in fact full power and authority to do, take, and perform all and every act and thing whatsoever requisite, proper, or necessary to be done, in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as I might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that said attorney in fact, or his substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted. 6. This power of attorney ends twenty-four (24) months from the date of execution. 7. The above named applicant has filed with the Colorado Marijuana Licensing Authority an application for a Marijuana license. Said applicant understands that it is seeking the granting of a privilege and acknowledges that the burden of proving its qualifications for a favorable determination is at all times on the applicant. 8. I do, for myself, my heirs, executors, administrators, successors, and assigns, hereby release, remise, and forever discharge the person to whom this request is presented, and his agents and employees from all and all manner or actions, causes of action, suits, debts, judgments, executions, claims, and demands whatsoever, known or unknown, in law or equity, which the applicant ever had, now has, may have, or claims to have against the person to whom this request is being presented or his agents or employees arising out of or by reason of complying with the request. 9. A reproduction of this request by photocopying or similar process shall be for all intents and purposes as valid as the original. 		
Applicant's Last Name (Please Print) Salturelli	First Name David	Full Middle Name Gray
Signature 	<small>Document ID: 8247EFCEA02349D...</small> <small>FORM MUST BE SIGNED IN ADOBE ACROBAT PRO OR READER</small>	Date (MMDDYYYY) 10/06/2022

REQUIRED

Affirmation of Eligibility for Social Equity License

Applicant affirms that, prior to submission of this application, he/she was compliant with the following criteria established pursuant to section 44-10-308 (4), C.R.S., and that he/she qualifies to be a social equity licensee.

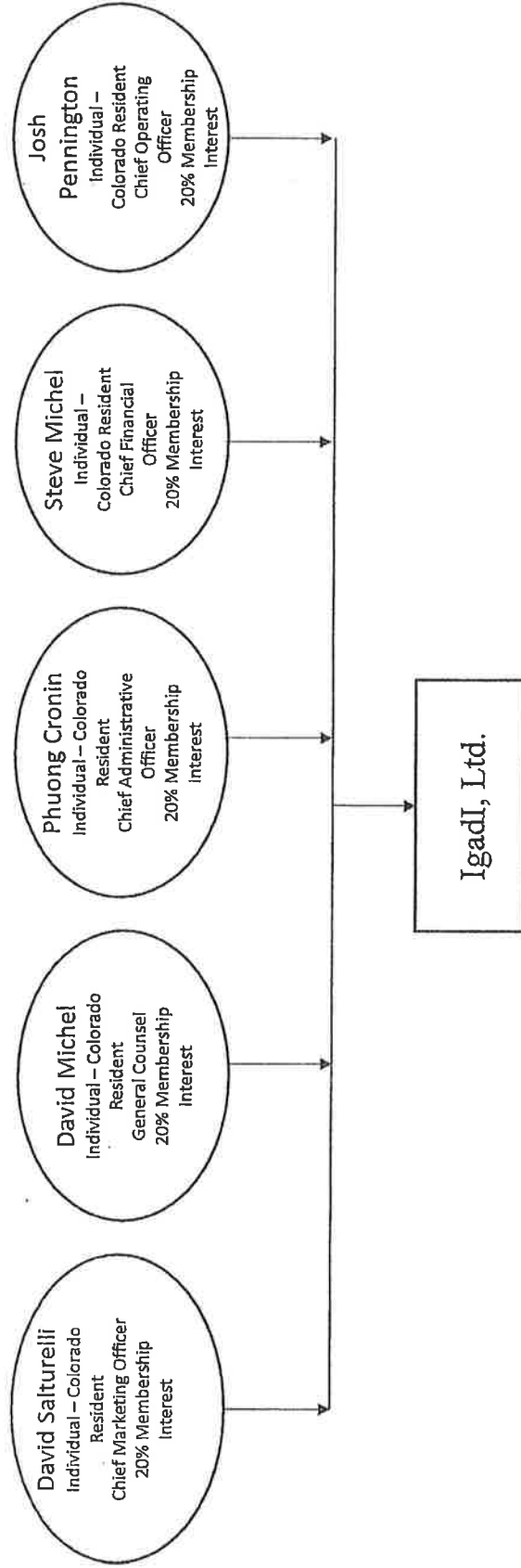
1. The applicant is a Colorado resident.
 - a. Applicant may demonstrate his/her residency by submitting
 - 1) A current valid Colorado driver's license or Colorado identification card with a current address
 - 2) A government issued photo identification and two (2) of the following documents:
 - Utility or telephone bill
 - Vehicle registration
 - Voter registration card
 - Statement from a major creditor
 - Bank statement
 - Recent County tax notice
 - Recent contract/mortgage statement
2. The applicant has not previously owned a Regulated Marijuana Business that was subject to revocation.
3. The applicant has demonstrated at least one of the following: (Check at least one of the applicable criteria)
 - The applicant resided for at least fifteen (15) years between the years 1980 and 2010 in a census tract designated by the Office of Economic Development and International Trade as an Opportunity Zone, or designated as a Disproportionate Impacted Area. (A Disproportionate Impacted Area is defined as a census tract in the top 15% of the following: (a) unemployment, (b) school dropout rates, (c) poverty, or (d) the number of individuals receiving public assistance.)
 - a. To demonstrate the Applicant residence during the relevant time period he/she may submit:
 - School records, rental or lease agreements, utility bills, mortgage statements, loan documents, bank records, tax returns, or other documents which proves the applicant's residency
 - An affirmation, under penalty of perjury, of the applicant's residence and provide the name(s) and contact information for at least one individual who can verify the applicant's place of residency during the time period at issue.
 - The applicant or applicant's parent, legal guardian, sibling, spouse, child, or minor in their guardianship was, (a) arrested for a marijuana offense, (b) convicted of a marijuana offense, or (c) was subject to civil asset forfeiture related to a marijuana investigation.
 - a. The applicant must provide affirmation of the familial relationship, and court or other documents demonstrating the family member's arrest or conviction or that the family member was subject to asset forfeiture related to a marijuana investigation
 - The applicant's household income in the year prior to application did not exceed fifty percent (50%) of the state median income as measured by the number of people who reside in the Applicant's household.
 - a. The applicant must provide his/her tax return for the prior year
4. The applicant, or collectively one or more social equity proposed licensees, will hold at least fifty-one percent (51%) ownership of the Regulated Marijuana Business.

I, David Salturelli, as the applicant for this New Regulated Marijuana Social Equity
Print

Business state under penalty of perjury, pursuant to §18-8-503, that the foregoing is true and correct to the best of my knowledge, information and belief.

Signature	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> <small>DocuSigned by: 9247EFCFA02349D...</small>	<small>Date (MMDDYYYY)</small> 10/06/2022
-----------	--	---

IgadI, Ltd. Organizational Chart



David Salturelli

June 30, 2014

Buncombe County Clerk of Court,

I, David Gray Salturelli, would like to request ALL paperwork and documentation regarding a Minor In Possession of Alcohol charge I received in the summer of 2010.

Please contact me with any other information I need to submit to you. Thank you.

Phone:

Email: d:

X _____

Date: 6/30/14

UNIFORM SUMMONS & COMPLAINT OR PENALTY ASSESSMENT

No. 3917651
COLORADO STATE PATROL

STATE OF COLORADO
 DATE OF VIOLATION: 12-30-11
 TIME OF VIOLATION: 2132
 APPROXIMATE LOCATION OF VIOLATION, STATE OF COLORADO: CO #160 MP 235
 COUNTY: ALAMOSA
 NO.: 30
 CASE REPORT NO.: 58111775
 DOMESTIC VIOLENCE OFFENSE
 SEXUAL OFFENSE
 INJURY / FATAL ACCIDENT
 PROPERTY DAMAGE ACCIDENT
 V.R.A. CRIME (VICTIM WITNESS)
 AGGRESSIVE DRIVER
 CONSTRUCTION ZONE
 SCHOOL ZONE
 TRAFFIC CITATION
 FBNAL CITATION

DEFENDANT LAST NAME: SACTURELLI
 FIRST NAME: DAVID
 M.I.: G
 DATE OF BIRTH: [blank]
 AGE: [blank]
 CONTACT TELEPHONE NO.: [blank]
 DEFENDANT HOME ADDRESS: [blank]
 CITY / STATE / ZIP: [blank]
 DRIVER'S LICENSE NO.: [blank]
 CDL DRIVER
 CLASS: [blank]
 ENDORSEMENTS: [blank]
 STATE: [blank]
 RACE: [blank]
 SEX: [blank]
 HEIGHT: [blank]
 WEIGHT: [blank]
 HAIR: [blank]
 EYES: [blank]
 VEHICLE LICENSE NO.: [blank]
 VEHICLE LICENSE TYPE: [blank]
 VEHICLE LICENSE STATE: [blank]
 VIN: [blank]
 VEHICLE COLOR (TOP/BOTTOM): [blank]
 VEHICLE YEAR: [blank]
 VEHICLE MAKE: [blank]
 VEHICLE MODEL: [blank]
 REGISTERED OWNER NAME/ADDRESS: [blank]
 SAME AS DEFENDANT

CC	CRS	OFFENSE	FINE - \$	PTS
800	42-4-1301(1)(a)	Drove vehicle while under the influence of alcohol or drugs or both	Summons	12
812	42-4-1301(2)(a)	Drove vehicle with blood alcohol content of 0.08 or more	Summons	12
801	42-4-1301(1)(b)	Drove vehicle while ability impaired by alcohol or drugs or both	Summons	8
	42-4-1101() ()	Speeding mph in a zone		0
	42-4-237(2)	Drove vehicle when safety belt not in use () Driver () Front Seat Passenger		0
574	42-4-236() () ()	Failed to provide/ properly use (rear facing/ forward facing) child restraint System or booster seat/ safety belt-positioning device/ safety belt.		0
580	42-2-105.5(3)	Operator under 18 (not wearing seatbelt/ allowed occupants w/o seat belts/ child restraint systems)	Summons	2
954	42-4-1409(1)	Owner operated uninsured motor vehicle on a public roadway	Summons	4
956	42-4-1409(2)	Operated an uninsured motor vehicle on a public roadway	Summons	4
957	42-4-1409(3)	Failed to present evidence of insurance upon request	Summons	4
	42-2-138() () ()	Drove motor/off highway vehicle when license under restraint:		3
	42-2-101(1)	Drove vehicle without a valid driver's license		0
038	42-3-114	Displayed Expired Number Plates		4
	42-4-1402()	Careless driving (caused bodily injury / caused death)		4
142	42-4-1008(1)	Following too closely		4
319	42-4-703(3)	Disregarded/Fail to stop as required at stop sign at through highway.		3
	42-4-1007(1)(a)()	Changed lanes when unsafe () Failed to drive in a single lane (weaving)		2
436	42-4-608(1)	Failed to use turn signals		4
304	42-4-604	Failed to obey traffic control signal		3
146	42-4-711(1)	Drove vehicle improperly on mountain highway		0
700	42-4-106(5)(a)(III)	Commercial vehicle failed to comply with (Tire/Chain) restrictions		0
713	42-4-235(2)(a)	Commercial vehicle failed to comply with DPS rules and regulations governing safety Standards and specifications.		0
X	PCA 18-18-406(1)	POSS OF 2.03 OR LESS OF MARIJUANA 50m		RA

FINGERPRINTED PHOTOGRAPHED
 FLACARD HAZMAT
 CMV REQ. CDL
 CIV UNDOT# [blank]
 DNA SURCHARGE \$2.50
 TOTAL SURCHARGE (\$): [blank]
 TOTAL FINE + SURCHARGE: [blank]

SUMMONS TRAFFIC INFRACTION OFFENSE
 I PROMISE TO APPEAR VALID COLO DL

DEFENDANT IN CUSTODY DEFENDANT IN CUSTODY

YOU ARE SUMMONED AND ORDERED TO APPEAR TO ANSWER CHARGES AS NOTED ABOVE BY:
 ALAMOSA COUNTY COURT
 ADDRESS/DIRECCION DE LA COURTE: 702 4TH ST
 CITY/CUBAD: ALAMOSA
 APPEARANCE DATE/TIME: 01/07/12
 APPEARANCE TIME/TIMEPO: 1:30pm
 DISTRICT: 5
 TROOP: B
 PATROL: P
 DATE ISSUED: 12-30-11

PRINT OFFICER LAST NAME: CRELL
 NUMBER: 1609

-COURT COPY-

NOTES:

ATTORNEY FOR DEFENDANT	ATTORNEY WAIVED	() DEFENDANT FTA	DATE:
DATE DEFENDANT ADVISED OF RIGHTS AND ARRAIGNED	JURY WAIVED	() CIVIL WARRANT TO ISSUE	
REQUEST FOR TRIAL/TRAFFIC SETTING	NUMBER OF JURORS	DATE OF ORDER:	
CONTINUED TO (DATE/TIME)	AT REQUEST OF	SIGNATURE OF JUDGE / MAGISTRATE	
CONTINUED TO (DATE/TIME)	AT REQUEST OF	SIGNATURE OF DISTRICT ATTORNEY	

CASE NUMBER	DOCKET NUMBER					TRIAL / HEARING / TVB PAYMENT							DATE					
						FINES, COSTS AND PENALTIES										SUSPENDED		
						PLEA		FINDING			FINE	DAYS JAIL	COURT COSTS	PUBLIC SERVICE	RESTITUTION	MISC	FINE	DAYS JAIL
GUILTY	NOT GUILTY	DISM	GUILTY	NOT GUILTY														
SUBTOTAL																		

<input type="checkbox"/> DEFERRED JUDGEMENT	STIPULATION	DATE TO BE COMPLETED BY:
<input type="checkbox"/> DEFERRED PROSECUTION	STIPULATION	DATE TO BE COMPLETED BY:
<input type="checkbox"/> EDUCATION/TREATMENT	STIPULATION	DATE TO BE COMPLETED BY:

TOTAL FINES	\$	JUDGE/MAGISTRATE (SIGNATURE)
TOTAL COSTS	\$	
TOTAL	\$	COUNTY COURT CLERK (SIGNATURE)
TOTAL REMITTED	\$	

County Court, Alamosa County, State of Colorado
Court Address: 702 Fourth St., Alamosa, CO 81101
Phone Number: (719) 589-4996

Plaintiff: THE PEOPLE OF THE STATE OF COLORADO
vs.
Defendant: Saltarelli, David

FEB - 7 2012

▲ COURT USE ONLY ▲

Case Number:
Div.: 4 Crim:

C.R.C.P. RULE 11 ADVISEMENT and PLEA

- §1. I am the defendant in this case and acknowledge that my true name is as stated above. I realize that if I am not a citizen of the United States that under the laws of the United States, conviction of a crime may result in deportation, exclusion from admission to the United States, or denial of naturalization.
- a. I also understand that if I am IN CUSTODY AND am a citizen of another country I have the right to have the Court notify my country's consular representative here in the United States. If I want the Court to do that I understand that I need to let the Judge know and I may do so at this time.
- §2. I understand that I have the right to remain silent, that I do not have to submit this plea of guilty, and that anything I write or say may be used against me. Knowing this, I acknowledge and understand the following statement of the rights that the I have in this case:
- a. I have the right to enter a plea of not guilty and have a trial in this case either to the Court or to a jury.
- b. I have the right to be represented by an attorney throughout the trial and at all proceedings leading up to trial.
- c. If I do not have the means to hire an attorney and I am charged with a class 1 misdemeanor, DUI, DUI PER SE, DWAI, DUR, DUD, DUS, or if a jail sentence is being requested, I can apply for the Public Defender and if I meet the financial guidelines the Court will appoint one for me without cost to me.
- d. I am presumed innocent of the charges pending against me, and that presumption of innocence will remain with me throughout the trial until the prosecution presents evidence to prove me guilty beyond a reasonable doubt.
- e. At the trial, I have the right to be confronted by the witnesses called to testify against me and to cross-examine those witnesses.
- f. I have the right to present evidence in my own defense at the trial and to compel the attendance of witnesses by subpoenas issued by this Court.
- g. I have the right to remain silent at the trial or testify in my defense as I choose. If I choose to remain silent, I understand that my silence cannot be used against me.
- h. After the trial is over, I have the right to appeal to a higher court to review any conviction.
- §3. I acknowledge that I have read and understand the elements of the offense(s) and the penalty for the offense(s) AS SET FORTH IN THE ATTACHED APPENDICES M II
- §4. I understand the penalties as stated are within the discretion of the Court. The Court is not bound in sentencing by any representations or stipulations.
- §5. I am entering a plea of guilty to the offense(s). I understand that the State would have to prove each element of the offense(s) beyond a reasonable doubt before I could be convicted of the offense(s) in a trial. I understand and state that:
- a. I am entering my plea of guilty voluntarily and not as a result of coercion or undue influence on the part of anyone. There have been no threats, force or promises made to me to cause me to enter this plea.

--over--

- b. I understand that the Court will not be bound by any representations made to me by anyone concerning the penalty to be imposed or the granting or denial of probation, unless such representations are included in a formal plea agreement approved by the Court.
- c. I acknowledge that there is a factual basis for this plea or if this plea is a result of a plea bargain, I waive the establishment of a factual basis for the charge.
- d. At this time, I am not under the influence of any drugs, intoxicants, or medication which would interfere with my ability to understand the advisement given in this form or these proceedings.
- e. I understand a plea of guilty to certain offenses will subject me to a greater penalty if I should ever again be convicted of or plead guilty to the same offense. Similarly, I understand that I may be subject to a greater penalty now, at sentencing, if I have in the past been convicted of or pled guilty to the same offense to which I am pleading guilty now. In these circumstances the penalty imposed may be greater than specified on the Appendix. Such offenses include: Violations of a Restraining Order, Domestic Violence, additional offenses for Driving Under the influence of Alcohol or Drugs, Driving While Impaired by Alcohol or Drugs, Failure to Provide Proof of Insurance, Driving Without a Valid Driver's License, and some other offenses.
- f. **Notice to defendant regarding DNA Collection and Testing:**
I understand that pursuant to CRS 16-23-103 any adult who has been charged with a felony and was required to submit to DNA testing and collection may petition the Court for expungement of those DNA records. If all felony charges in my case are dismissed OR if I am acquitted of the charges against me OR if I enter a plea of guilty to a charge other than a felony, I may request expungement of my DNA results. If I meet any one of the above criteria I may request expungement of my DNA record and destruction of those results upon completion of my case, after final order of the Court. I understand I should refer to CRS 16-23-105 for proper expungement procedures.
- g. I acknowledge that I have read and understand this advisement of rights, and I understand that by entering my plea of guilty to the charge I am waiving and giving up these rights. I also acknowledge that I have read the statements I am making and I affirm that the statements made are true and correct.
- h. I UNDERSTAND: That this conviction [(if not deferred)] will be reported to the Motor Vehicle Division of the State of Colorado for recording on my driving record and that points may be assessed against my driving record.
- i. [initial if applicable] DEFERRED SENTENCE: plea is entered on basis of a deferred sentence as set forth in the DEFERRED SENTENCE AGREEMENT submitted with this Rule 11 Advisement and Plea.
- j. [initial if applicable] WAIVER OF RIGHT TO A LAWYER: I understand that I have the right to have a lawyer represent me as explained in Section 2. I am voluntarily giving up that right and I choose to enter a plea of guilty at this hearing without the advice of a lawyer.

DEFENDANT'S SIGNATURE _____

DATE 2/7/12

DEFENSE COUNSEL SIGNATURE _____ Reg. No. _____

FINDING OF THE COURT AND ORDER

The Court finds that the Defendant has entered his/her guilty plea to the charge voluntarily with a full understanding of his or her rights, the nature of the charge or charges and the possible penalties; therefore, the Court accepts the plea and orders as follows.

DATE:

MICHAEL A. GONZALES
Alamosa County Court Judge

§11. MARIHUANA POSSESSION UNDER 2 OZ. C.R.S. 18-18-406(1)

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
- b. That you possessed two ounces or less of marijuana.
- c. This offense is a Class 2 Petty Offense.

§12. MENACING C.R.S 18-3-206

- a. That in ALAMOSA County, Colorado, on or about the date alleged in the complaint you did:
- b. By any threat or physical action
- c. Knowingly place or attempt to place another to fear of imminent serious bodily injury.
- d. This offense is a Class 3 Misdemeanor.

§13. OBSTRUCTING A PEACE OFFICER OR FIREFIGHTER C.R.S. 18-8-104

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
- b. That you knowingly obstructed, impaired or hindered
- c. the enforcement of the penal law or preservation of the peace by a peace officer acting under color of his official authority, or
- d. the prevention, control or abatement of fire by a firefighter acting under color of his official authority, or
- e. the administration of emergency care or assistance by a volunteer, acting in good faith to render such care or assistance without compensation at the place of an emergency or accident.
- f. By using or threatening to use violence, force or physical interference or obstacle.
- g. The penalty for this offense is a Class 2 Misdemeanor.

§14. POSSESSION OR CONSUMPTION OF ALCOHOL BY AN UNDERAGE PERSON C.R.S 18-13-122

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
- b. That you were under twenty-one years of age.
- c. And that you possessed or consumed ethyl alcohol.
- d. This offense is a Class 2 Petty Offense and the court may impose a fine and order that you perform 24 hours of useful public service and complete an alcohol evaluation and treatment.

§15. POSSESSION OF ALCOHOL BY AN UNDERAGE PERSON C.R.S. 12-47-901

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
- b. That you were under twenty-one years of age.
- c. And you possessed ethyl alcohol to any public place, including public street, alleys, roads, highways or upon property owned by the state of Colorado or any subdivision thereof, or inside vehicles upon the same.
- d. This offense is a Class 2 Misdemeanor and the court may impose a fine and order that you perform 24 hours of useful public service and complete an alcohol evaluation and treatment.

§16. RESISTING ARREST C.R.S. 18-8-103

- a. That you were to ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
- b. That you knowingly prevented or attempted to prevent a peace officer acting under the color of his official authority from effecting an arrest of yourself or another,
- c. by using or threatening to use physical force or violence against the peace officer (or another) or by using any means which creates a substantial risk of causing physical injury to the peace officer or another.
- d. This offense is a Class 2 Misdemeanor.

§17. THEFT C.R.S. 18-4-401

- a. That you were to ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
- b. That you knowingly obtained or exercised control over anything of value of another without authorization, or by threat or deception and intended to deprive the other person permanently of the use or benefit of the thing of value or
- d. knowingly used, concealed or abandoned the thing of value in such a manner as to deprive the person permanently of its use or benefit or
- e. used, concealed or abandoned the of value intending that such use, concealment or abandonment deprive the other person permanently of its use and benefit or demanded consideration to which you were not legally entitled as a condition of restoring the thing of value to the other person.
- f. If the value of the thing involved is less than \$100.00, theft is a Class 3 Misdemeanor; or if the value is under \$500.00, theft is a Class 2 Misdemeanor, \$500.00 to \$1000.00, theft is a Class 1 Misdemeanor.

§18. VIOLATION OF A RESTRAINING ORDER C.R.S. 18-6-803.5(1)

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
- b. That you contacted, harassed, injured, intimidated, molested, threatened or touched a protected person or came within a specified distance of a protected person or premises.
- c. That such conduct was prohibited by a restraining order issued by a state or municipal court,
- d. After you were personally served with such order or otherwise had acquired from the court actual knowledge of its contents.
- e. This is a Class 2 misdemeanor; but if you have been previously convicted of violating C.R.S. 18-6-803.5 (1), or if this charge is for violating a restraining order issued under C.R.S. 18-1-1001, than this is a Class 1 Misdemeanor.

§19. DOMESTIC VIOLENCE 18-6-801

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
- b. That crime(s) convicted of was a method of control, punishment, intimidation or revenge
- c. directed against a person with whom you were or are involved to an intimate relationship.
- d. This offense is a sentence enhancement charge requiring that treat evaluation and program, conforming to standards adopted by the domestic violence management treatment board as required by C.R.S. 16-11.8-104

§20. OTHER: THE ELEMENTS OF _____, C.R.S. _____

The elements are _____
The offense is a Class _____ Misdemeanor Petty Offense

..... THE PENALTIES AS BASED UPON CLASSIFICATION ARE AS FOLLOWS

Class 1 Misdemeanor-6 mo. to 18 mo. (24 mo. for extraordinary risk crime) in County jail and/or a fine of \$500.00 to \$5000.00
Class 2 Misdemeanor-3 mo. to 12. mo. in County jail and/or a fine of \$250.00 to \$1000.00 Class 3 Misdemeanor-up to 6 mo. in County jail and or a fine of \$50.00 to \$750.00 Petty Offense-up to 6 mo. in County jail and or a fine of up to \$500.00

§1. 3° ASSAULT C.R.S. 18-3-204

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
b. That you knowingly or recklessly caused bodily injury to another person or with criminal negligence you caused bodily injury to another person by means of a deadly weapon.
c. This offense is a Class 1 Misdemeanor.

§2. CRIMINAL MISCHIEF C.R.S. 18-4-501

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
b. That you knowingly damaged the real or personal property of one or more persons in the course of a single criminal episode.
c. Where the aggregate damage to property is under \$500.00, criminal mischief is a Class 2 Misdemeanor; or if the value is \$500.00 to \$1000.00, criminal mischief is a Class 1 Misdemeanor.

§3. 2° CRIMINAL TRESPASS C.R.S. 18-4-503

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
b. That you unlawfully entered or remained upon the premises of another person when such premises were enclosed in a manner designed to exclude intruders or when the premises were fenced; or
c. that you knowingly and unlawfully entered or remained in the common areas of a hotel, motel, condominium or apartment building.
d. This offense is a Class 3 Misdemeanor, except if the premises were classified as agricultural land, this offense is a Class 2 Misdemeanor.

§4. 3° CRIMINAL TRESPASS C.R.S. 18-4-504

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
b. That you unlawfully entered or remained upon the premises of another person.
c. This offense is a Class 1 Petty Offense; except if the premises were classified as agricultural land, this offense is a Class 3 Misdemeanor.

§5. CHILD ABUSE-KNOWINGLY/RECKLESSLY-CAUSED BODILY INJURY C.R.S. 18-6-40 (1)(a), (7)(a)(V)

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
b. That you caused injury to a child's life or health, or permitted a child to be unreasonable placed in a situation that poses a threat of such injury;
c. Or engaged in a continued pattern of conduct that results in malnourishment, lack of proper medical care, cruel punishment, mistreatment or accumulation of injuries that ultimately results in serious bodily injury to a child.
d. That the acts were done knowingly or recklessly.
e. That the injury was other than serious bodily injury.
f. This offense is a Class 1 Misdemeanor.

§6. DISORDERLY CONDUCT C.R.S. 18-9-106

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
b. That you intentionally, knowingly or recklessly
 (1)(a) made a course and obviously offensive utterance, gesture, or display in a public place and that this intended to incite an immediate breach of the peace, this offense is a Class 1 Petty Offense; or
 (1)(c) made unreasonable noise in a public place or near a private residence that you had no right to occupy (POI); or
 (1)(d) fought with another in a public place except in an amateur or professional contest of athletic skill (M3); or
 (1)(e) not being a peace officer, you discharged a firearm in a public place except when engaged in lawful target practice or hunting (M2); or
 (1)(f) not being a peace officer, you displayed an article used or fashioned in a manner to cause a person to reasonably believe it was a deadly weapon in a public place in a manner calculated to alarm (M2)

§7. DRUG PARAPHERNALIA POSSESSION C.R.S. 18-18-428(1)

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
b. That you possessed drug paraphernalia
c. That you knew or reasonably should have known the same could be used under circumstances in violation of the laws of the state.
d. This offense is a Class 2 Petty Offense

§8. FALSE REPORTING TO AUTHORITIES C.R.S. 18-8-111

- a. That in ALAMOSA County, Colorado, on or about the time alleged in the complaint you did:
b. Knowingly cause a false alarm, fire or other emergency to be transmitted to or within an official or volunteer fire department, ambulance service or any other government agency which deals with emergencies involving danger to life or property; or
c. Make a report or knowingly cause the transmission of a report to law enforcement authorities pretending to furnish information relating to an offense or other incident within their official concern when you knew that you had no such information or you knew the information was false.
d. This offense is a Class 3 Misdemeanor

§9. FRAUD BY CHECK C.R.S. 18-5-205

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
b. That you, knowing you had insufficient funds with the drawee bank, issued check(s) within a sixty day period for the payment of services, wages, salary, commission, labor, rent, money, property or other things of value.
c. If the total of the checks involved is less than \$100.00, this offense is a Class 3 Misdemeanor; or if the total of the checks involved is \$100.00 or more but less than \$500.00, this offense is a Class 2 Misdemeanor.

§10. HARASSMENT C.R.S. 18-9-111

- a. That you were in ALAMOSA County, Colorado, at or about the time, date and place alleged in the complaint.
b. That with the intent to harass, annoy or alarm another person you did:
 (1)(a) strike, shove, kick or otherwise touch a person or subject that person to physical contact; or
 (1)(b) in a public place direct obscene language or make an obscene gesture to or at another person; or
 (1)(c) follow a person in or about a public place; or
 (1)(e) initiate communication with a person by telephone in a manner intended to harass or threaten bodily injury or property damage or make a comment, request, suggestion or proposal by telephone which is obscene or
 (1)(f) make a telephone call or caused a telephone to ring repeatedly whether or no a conversation ensued with no purpose of legitimate conversation; or
 (1)(g) make repeated communication at inconvenient hours or in offensively coarse language; or
 (1)(h) repeatedly insult, taunt or challenge another in a manner likely to provoke a violent or disorderly response.
c. The penalty for this offense is a Class 3 Misdemeanor; and a Class 1 Misdemeanor with regard to (1)(a) if committed with the intent to intimidate or harass another person because of that person's actual or perceived race, color, religion, ancestry or national origin.

PRE-TRIAL CONFERENCE FORM

DEFENDANT: Saltarelli, David

CASE # _____

FEB - 7 2012

Defendant will **PLEAD GUILTY** to the following charges:

C.R.S. cite:

Name of Offense:

Marijuana Poss. Under 2oz.

The District Attorney moves to **DISMISS** the following counts, pursuant to Defendant's plea of guilty to the above-listed offense(s): _____

SENTENCING CONDITIONS:

1. **DEFERRED SENTENCE STIPULATION:** The District Attorney and the above-named Defendant hereby stipulate and agree that the sentence and judgment to the offense(s) of _____ shall be deferred for a period of _____ months, pursuant to the following conditions: _____

Defendant expressly recognized that if any of the above-listed conditions are violated, a judgment against the Defendant may enter and the court may impose sentence.

2. **RESTITUTION:** _____ (victim) _____ (amount)

3. **OTHER CONDITIONS:** _____

NO PLEA AGREEMENT REACHED

_____ Set for trial to (A) _____ Jury (B) _____ The Court

_____ Pre-Trial Conference continued by _____

_____ Defendant waives right to speedy trial for period of continuance.

_____ Other: _____

Defendant/Counsel

[Signature]
DA or Deputy DA

2/7/12
Date

Alamosa Combined Court Shirley Skinner, Clerk of the Combined Court 702 Fourth St. Alamosa, CO 81101 Phone Number: (719) 589-4996	<i>Alamosa Combined Court</i> <i>Shirley Skinner, Clerk</i>
THE PEOPLE OF THE STATE OF COLORADO V Defendant <i>Salturellis, David</i>	FEB - 7 2012 <i>[Signature]</i> Alamosa Combined Court COURT USE ONLY
	Case Number: Division Courtroom

ADVISEMENT OF RIGHTS (MISDEMEANOR/TRAFFIC)

YOU, THE DEFENDANT ARE ADVISED:

1. This is an Arraignment and you are expected to enter a plea to the charges against you. You may plead "GUILTY", "Not Guilty" or "No Contest."
2. The Judge will explain the nature of the charges against you and the possible penalties that may be imposed.
3. **YOU HAVE THE RIGHT TO HAVE A LAWYER REPRESENT YOU.** You may have a lawyer represent you at any stage of the Court proceedings. If you would like to speak to a lawyer before you enter a plea, you may do so. You should inform the Judge and ask for a continuance of the Arraignment to allow you to talk to a lawyer. If you are charged with an offense for which the Court usually imposes jail time, you have the right to have a lawyer appointed to represent you (Public Defender), if you cannot afford to hire your own lawyer. The Judge will advise you how to apply for a Public Defender, if one may be appointed in your case.
4. **YOU HAVE THE RIGHT TO HAVE A TRIAL ON THE CHARGE(S) AGAINST YOU.** At the Trial, the Prosecution has the burden of proving the charge(s) against you beyond a reasonable doubt. You are presumed innocent and can only be found guilty if the Prosecution presents enough evidence to prove your guilty beyond a reasonable doubt. At the Trial, you have the right to cross-examine the witnesses called to testify against you and to present evidence and subpoena witnesses on your behalf.
5. **YOU HAVE THE RIGHT TO REMAIN SILENT CONCERNING THE CHARGE(S) BROUGHT AGAINST YOU.** This means you have the right not to incriminate yourself. Anything you say which is a confession or an admission could be used as evidence at a later Trial to show that you are guilty. Your silence cannot be used against you and does not indicate any wrongdoing on your part.
6. **YOU HAVE THE RIGHT TO APPEAL.** If you are found guilty, you have the right to Appeal to a higher Court.
7. **IF YOU PLEAD NOT GUILTY,** it means that you deny the charges against you. By pleading "Not Guilty", you are telling the Court that you wish formal proof to be presented to a Judge and that you require the Prosecution to prove your guilty beyond a reasonable doubt. You are entitled to a "Speedy Trial" if you plead "Not Guilty." A "Speedy Trial" usually means the Trial must be held within six months of your pleading "Not Guilty".
8. If you plead "GUILTY", it means you admit the charge(s) against you and that you give up your right to a Trial. By pleading guilty, you are telling the Court that you agree that the Judge should impose a sentence or penalty for your violation of the law.
9. You may plead "NO CONTEST". This means that you neither admit nor deny the charges, but that you do not want to fight it. The Court may or may not accept the plea of "No Contest". If the Court accepts the plea, you will be sentenced as though you had pleaded Guilty.
10. By pleading "Guilty" or "Not Contest" without the help of a Lawyer, you will be **GIVING UP THE RIGHT TO HAVE A LAWYER REPRESENT YOU AT THIS STAGE OF THE PROCEEDINGS.**
11. If you plead "Guilty" or "No Contest", you will have the **RIGHT TO MAKE A STATEMENT ON YOUR OWN BEHALF** before the Judge imposes a sentence.
12. If you are charged with a **PETTY OFFENSE**, it is a violation where the maximum penalty is a \$500 fine and/or 6 months in the County Jail. If the possible penalties are greater, the offense charged is a **MISDEMEANOR**. If you are charged with a **PETTY OFFENSE**, and want a **JURY TRIAL**, you must file a **WRITTEN REQUEST** for a Jury Trial within 10 days of your plea and **PAY A \$25 JURY FEE**. The Jury fee may be set aside if you cannot pay it. If you do not file the request and do not pay the fee, you will be giving up your right to a Jury Trial.
13. If you are charged with a **MISDEMEANOR**, and you have the **RIGHT TO A JURY TRIAL WITHOUT A FORMAL REQUEST** or payment of a fee. You have a trial before a Judge alone, however, you give up the right to a Jury Trial.
14. You are advised that there is a **RESTRAINING ORDER** which restrains you from harassing, molesting, intimidating, or retaliating against any witness to or alleged victim of the acts you are charged with committing. This Restraining Order remains in effect until the case is dismissed or you complete all the requirements of any sentence in the case.

I HAVE CAREFULLY READ AND I UNDERSTAND THE ABOVE ADVISEMENT.

Dated: 2/7/12
 Revised: 10/22/07

Defendant: _____