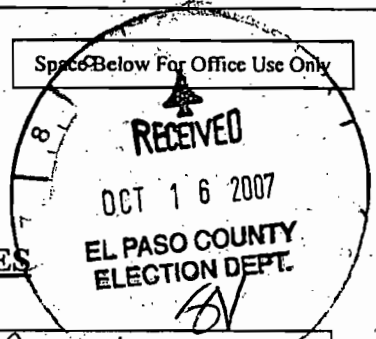


Colorado Secretary of State  
Elections Division  
1700 Broadway, Ste. 270  
Denver, CO 80290  
Ph: (303) 894-2200 x 3  
Fax: (303) 869-4861  
www.sos.state.co.us



Space Below For Office Use Only



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

**Full Name of Committee/Person:** A BETTER COMMUNITY FOR D-38  
As Shown On Registration

**Address of Committee/Person:** 617 FOREST VIEW COURT

**City, State & Zip Code:** PALMER LAKE, CO 80133-0447

**Committee Type:** ISSUE

**Name and Address of Financial Institution:** INTEGRITY BANK AND TRUST  
1430 CIPRIANO LOOP, MONUMENT, CO 80132

**SOS ID NUMBER** (state committees ONLY):

**Type of Report**

- Regularly Scheduled Filing.**
- Amended Filing.** This amends previous report filed on (date)   
Submit changes or new information ONLY
- 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:** DEC. 3, 2006 Through OCT. 11, 2007  
Date Date

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

		Totals Detailed Summary Page
1	<b>Funds on Hand at the Beginning of Reporting Period</b> (monetary only)	\$ <u>1,220,74</u>
2	<b>Total Monetary Contributions</b> (line 11)	\$ <u>18,571,21</u>
3	<b>Total of Monetary Contributions &amp; Beginning Amount</b> (line 1 + line 2)	\$ <u>19,791,95</u>
4	<b>Total Monetary Expenditures</b> (line 19)	\$ <u>1,034,92</u>
5	<b>Funds on Hand at the End of Reporting Period</b> (monetary) (line 3 - line 4)	\$ <u>18,757,03</u>

**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:** HUGH EATON

**Registered Agent's Signature:** Hugh Eaton **Date:** 10/16/07

**Print Candidate Name:** \_\_\_\_\_

**Candidates Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**DETAILED SUMMARY**

Full Name of Committee/Person: A BETTER COMMUNITY FOR D-38

Current Reporting Period: DEC, 3, 2006 Through OCT, 11, 2007

	<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>	\$	1,220.74
6	<b>Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "A")	\$	18,570.01
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$	—
8	<b>Loans Received</b> (Please list on Schedule "C")	\$	—
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$	1.20
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$	—
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$	18,571.21
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$	—
13	<b>Total Contributions</b> (Line 11 + line 12)	\$	18,571.21
14	<b>Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "B")	\$	1,011.97
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$	22.95
16	<b>Loan Repayments Made</b> (Please list on Schedule "C")	\$	—
17	<b>Returned Contributions (To donor)</b> (Please list on Schedule "D")	\$	—
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$	—
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$	1,034.92
20	<b>Total Spending</b> (Line 18 + line 19)	\$	1,034.92

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

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

Full Name of Committee/Person: A BETTER COMMUNITY FOR D-38

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

**PLEASE PRINT/TYPE**

1. Date Accepted <u>9/14/07</u>	4. Name (Last, First): <u>BARRITT, MARK</u>
2. Contribution Amt. \$ <u>20.00</u>	5. Address: <u>1141 WEST NOE RD</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>LARKSPUR, CO 80118</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>SELF-EMPLOYED</u>
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>8/27/07</u>	4. Name (Last, First): <u>BETZLER, DAVID</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>645 HIDDEN MARSH RD.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>BOOZ ALLEN HAMILTON</u>
	9. Occupation (if applicable, mandatory): <u>ASSOCIATE</u>

1. Date Accepted <u>9/24/07</u>	4. Name (Last, First): <u>BLANCH, RAY</u>
2. Contribution Amt. \$ <u>150.00</u>	5. Address: <u>21 SHERWOOD GREEN SQ.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>SCHOOL DISTRICT 38</u>
	9. Occupation (if applicable, mandatory): <u>SUPERINTENDENT</u>

1. Date Accepted <u>9/19/07</u>	4. Name (Last, First): <u>CAPLAN AND EARNEST LLC</u>
2. Contribution Amt. \$ <u>1,000.00</u>	5. Address: <u>1800 BROADWAY, SUITE 200</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>BOULDER, CO 80302</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

\* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

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

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

Full Name of Committee/Person: A BETTER COMMUNITY FOR P-38

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

PLEASE PRINT/TYPE

1. Date Accepted <u>9/25/07</u>	4. Name (Last, First): <u>COLORADO EDUCATION ASSOC.</u>
2. Contribution Amt. \$ <u>500.00</u>	5. Address: <u>1500 GRANT ST.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>DENVER, CO 80203</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>9/11/07</u>	4. Name (Last, First): <u>DEKLEVA, LOURANN</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>3380 HARMON DRIVE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>SCHOOL DISTRICT 11</u>
	9. Occupation (if applicable, mandatory): <u>VOLUNTEER ADMINISTRATOR</u>

1. Date Accepted <u>8/21/07</u>	4. Name (Last, First): <u>EATON, HUGH AND DEE DEE</u>
2. Contribution Amt. \$ <u>2,000.00</u>	5. Address: <u>P.O. BOX 447</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>PALMER LAKE, CO 80133</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>RETIRED</u>
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>8/27/07</u>	4. Name (Last, First): <u>EBERLY, MOLLIE</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>18015 GRANITE CIRCLE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>HAIRPLAY SALON</u>
	9. Occupation (if applicable, mandatory): <u>HAIR STYLIST</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: A BETTER COMMUNITY FOR D-38

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/1/07</u>	4. Name (Last, First): <u>FOREST VIEW ESTATES</u>
2. Contribution Amt. \$ <u>500.00</u>	5. Address: <u>P.O. Box 567</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>PALMER LAKE, CO 80133</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>9/20/07</u>	4. Name (Last, First): <u>H + L ARCHITECTURE</u>
2. Contribution Amt. \$ <u>3,000.00</u>	5. Address: <u>1621 18TH ST.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>DENVER, CO 80202</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>9/13/07</u>	4. Name (Last, First): <u>HUISMANN, SUE N. JOHNSON</u>
2. Contribution Amt. \$ <u>150.00</u>	5. Address: <u>18255 DAVIDSON ST</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory): <u>HOUSEWIFE</u>

1. Date Accepted <u>9/27/07</u>	4. Name (Last, First): <u>LOBBAN, LESLIE</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>19190 WHITE FAWN</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory): <u>HOMEMAKER/PARENT</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: A BETTER COMMUNITY FOR D-38

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

PLEASE PRINT/TYPE

1. Date Accepted <u>9/25/07</u>	4. Name (Last, First): <u>PAMER DIVIDE RANCH INC.</u>
2. Contribution Amt. \$ <u>666.67</u>	5. Address: <u>P.O. Box 2140</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80901</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>10/4/07</u>	4. Name (Last, First): <u>PAMER DIVIDE RANCHES ON WEST CHERRY CREEK, LLC</u>
2. Contribution Amt. \$ <u>666.67</u>	5. Address: <u>P.O. Box 3270</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>10/4/07</u>	4. Name (Last, First): <u>PAMER DIVIDE RANCHES ON EAST CHERRY CREEK LLC</u>
2. Contribution Amt. \$ <u>666.67</u>	5. Address: <u>P.O. Box 2140</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80901</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>8/27/07</u>	4. Name (Last, First): <u>PIKE, ROBB</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>18125 PINE VISTA PLACE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80908</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>COLORADO COLLEGE</u>
	9. Occupation (if applicable, mandatory): <u>DEVELOPMENT</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: A BETTER COMMUNITY FOR D-38

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

PLEASE PRINT/TYPE

1. Date Accepted <u>8/27/07</u>	4. Name (Last, First): <u>PLANK, STEPHEN</u>
2. Contribution Amt. \$ <u>250.00</u>	5. Address: <u>20415 ELK CREEK E,</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>RETIRED</u>
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>9/10/07</u>	4. Name (Last, First): <u>RAINTREE, JES</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>1120 EDENHURST CT,</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>SELF-EMPLOYED</u>
	9. Occupation (if applicable, mandatory): <u>INTERIOR DESIGN</u>

1. Date Accepted <u>8/27/07</u>	4. Name (Last, First): <u>RECTOR, TIMOTHY</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>1440 REGAL GLEN CT</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>SELF-EMPLOYED</u>
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>8/27/07</u>	4. Name (Last, First): <u>RLH ENGINEERING INC.</u>
2. Contribution Amt. \$ <u>250.00</u>	5. Address: <u>541 E. GARDEN DR.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>WINDSOR, CO 80550</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

\* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec. 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

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

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

Full Name of Committee/Person: A BETTER COMMUNITY FOR D-38

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

PLEASE PRINT/TYPE

1. Date Accepted <u>9/17/07</u>	4. Name (Last, First): <u>RUHMAN, LISA</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>18623 HONEY/SUCKLE WAY</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory): <u>HOUSEWIFE</u>

1. Date Accepted <u>9/14/07</u>	4. Name (Last, First): <u>SAUNDERS CONSTRUCTION INC.</u>
2. Contribution Amt. \$ <u>5,000.00</u>	5. Address: <u>695 SOUTH JORDAN ROAD</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>CENTENNIAL, CO 80112</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. Date Accepted <u>9/24/07</u>	4. Name (Last, First): <u>TIRPAK, CATHY</u>
2. Contribution Amt. \$ <u>200.00</u>	5. Address: <u>2455 LAKE MEADOW DRIVE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory): <u>HOUSEWIFE</u>

1. Date Accepted <u>9/22/07</u>	4. Name (Last, First): <u>TREES, DR. SHIRLEY</u>
2. Contribution Amt. \$ <u>200.00</u>	5. Address: <u>2520 EVERGREEN RD</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80921</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>SCHOOL DISTRICT 38</u>
	9. Occupation (if applicable, mandatory): <u>DIRECTOR OF ELEMENTARY ED.</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: A BETTER COMMUNITY FOR D-38

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

PLEASE PRINT/TYPER

1. <u>Date Accepted</u> 9/25/07	4. Name (Last, First): <u>WALDEN CORPORATION</u>
2. <u>Contribution Amt.</u> \$ <u>2,000.00</u>	5. Address: <u>P.O. Box 1870</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. <u>Date Accepted</u> 9/17/07	4. Name (Last, First): <u>WANGEMAN, CHERYL</u>
2. <u>Contribution Amt.</u> \$ <u>300.00</u>	5. Address: <u>1295 MEADOW LAKE WAY</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>SCHOOL DISTRICT 38</u>
	9. Occupation (if applicable, mandatory): <u>CHIEF FINANCIAL OFFICER</u>

1. <u>Date Accepted</u> 10/2/07	4. Name (Last, First): <u>WILSON, GAIL</u>
2. <u>Contribution Amt.</u> \$ <u>250.00</u>	5. Address: <u>18590 WHITE FAWN DRIVE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>SELF-EMPLOYED</u>
	9. Occupation (if applicable, mandatory):

1. <u>Date Accepted</u> 9/17/07	4. Name (Last, First): <u>YODER, BECKY</u>
2. <u>Contribution Amt.</u> \$ <u>100.00</u>	5. Address: <u>761 FOREST VIEW ROAD</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>PALMER LAKE, CO 80133</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory): <u>HOUSEWIFE</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)**

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

**Full Name of Committee/Person:** A BETTER COMMUNITY FOR D-38

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 2/12/07	4. Name: <u>COLORADO COMMUNITY NEWSPAPERS</u>
2. <u>Amount</u> \$ 645.76	5. Address: <u>47 THIRD ST.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
	7. Purpose of Expenditure: <u>ADVERTISING</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 2/12/07	4. Name: <u>U.S. POST OFFICE</u>
2. <u>Amount</u> \$ 14.00	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>PALMER LAKE, CO 80133</u>
	7. Purpose of Expenditure: <u>P.O. BOX RENT</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 8/24/07	4. Name: <u>U.S. POST OFFICE</u>
2. <u>Amount</u> \$ 18.00	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>PALMER LAKE, CO 80133</u>
	7. Purpose of Expenditure: <u>P.O. BOX RENT</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 9/17/07	4. Name: <u>TRI-LAKES PRINTING</u>
2. <u>Amount</u> \$ 334.21	5. Address: <u>1756 LAKE WOODMOOR DRIVE</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
	7. Purpose of Expenditure: <u>COPYING</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

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

Full Name of Committee/Person: A BETTER COMMUNITY FOR D-38

PLEASE PRINT/TYPE

1. <u>Date Provided</u>	4. Name (Last, First): <u>None</u>
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. *	

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."

**Schedule D – Returned Contributions & Expenditures**

Full Name of Committee/Person: A BETTER COMMUNITY FOR D-38

**Returned Contributions**

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

*NONE*

PLEASE PRINT/TYPE

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: _____

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)*

*NONE*

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): _____

**Schedule C - Loans**

Full Name of Committee/Person: A BETTER COMMUNITY FOR D-38

**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): NONE

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Original Amount of Loan: \$ \_\_\_\_\_ Interest Rate: \_\_\_\_\_

Loan Amount Received This Reporting Period: \$ \_\_\_\_\_

Total of All Loans This Reporting Period: \$ \_\_\_\_\_  
(Place on line 8 of Detailed Summary Report)

Principal Amount Paid This Reporting Period: \$ \_\_\_\_\_

Interest Amount Paid This Reporting Period: \$ \_\_\_\_\_

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: \$ \_\_\_\_\_

TERMS OF LOAN: \_\_\_\_\_  
Date Loan Received \_\_\_\_\_ Due Date for Final Payment \_\_\_\_\_

**LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN**

Full Name	Address, City, State, Zip	Amount Guaranteed