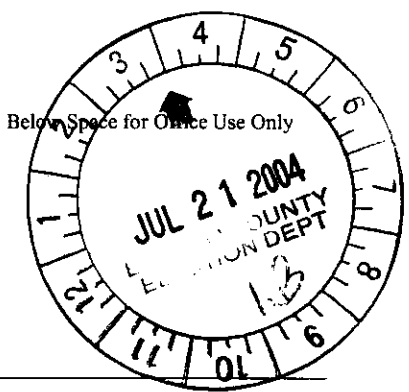


Colorado Secretary of State
Elections Division
1560 Broadway, Ste. 200
Denver, CO 80202
Ph: (303) 894-2200 x 3
Fax: (303) 869-4861
www.sos.state.co.us



COMMITTEE REGISTRATION FORM
(C.R.S. 1-45-108)

Committee Name: CITIZENS TO ELECT. ANDRE' VIGIL

Purpose/Office Sought: COUNTY COMMISSIONER DIST. # 4

Check Only One Committee Type:

Candidate Committee Political Party Small Donor Committee

Political Committee Issue Committee

Is this an amendment*? YES NO

* Description of what is being amended. Pursuant to Rule 23.1 any changes (including Filing Type) must be reported, with the appropriate officer, within five (5) days by filing an amended committee registration form. _____

Contact Information:

Name of Person Acting As Registered Agent (Treasurer): ANDRE' VIGIL

Address (Physical): 6590 WEEPING WILLOW DR COLO SPRINGS COLO 80925

Address (Mailing): _____

Telephone No.: 460-5902 390-93949 E-Mail: COMMISS - VIGIL@YAHOO.COM

Affiliation (if applicable): DEM.

Check Only One Filing Type:

Manual Filer
 Electronic Filer

Check Only One Jurisdiction:

Federal State County
 Municipal Multi-County
 Other: _____

Authorization:

Registered Agent's (Treasurer's) Signature: Andre' E Vigil Date: July 21, 04

Print Candidate Name: ANDRE' VIGIL

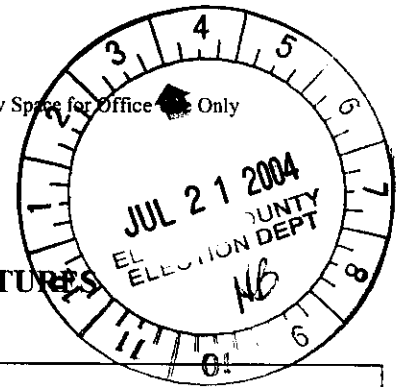
Candidate Address (include mailing): 6590 WEEPING WILLOW COLO. SPRINGS COLO 80925

Candidate Signature: Andre' E Vigil Date: July 21, 04

Colorado Secretary of State
 Elections Division
 1560 Broadway, Ste. 200
 Denver, CO 80202
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Below Space for Office Use Only



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

Full Name of Committee/Person:	ANDRE' UGIL As Shown On Registration
Address of Committee/Person:	6590 WEEPING WILLOW DR
City, State & Zip Code:	Colo. Springs Colo. 80925
Committee Type:	REAR CANDIDATE COMMITTEE
Name and Address of Financial Institution	113 CREDIT UNION 3505 N. CHESTNUT ST Colo. Springs Colo. 80907

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)

Reporting Period Covered: 3-11-04
date

Through July 15th 2004
date

Declared Total Spending (if applicable) [Art. XXVIII, Sec. 4(1)]
 \$ ~~859.28~~ 859.28

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ -0-
2	Total Monetary Contributions (line 11)	\$ 1160.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 1160.00
4	Total Monetary Expenditures (line 19)	\$ 592.91 592.91
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 567.09 567.09

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)

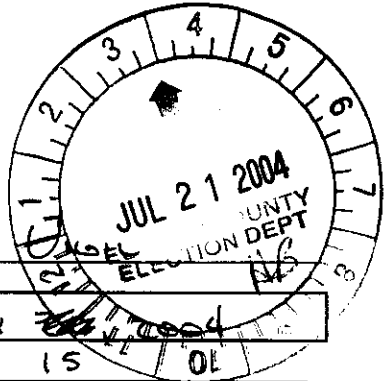
Print Registered Agent's (Treasurer's) Name: ANDRE' UGIL

Registered Agent's (Treasurer's) Signature: *Andre' E Ugil* Date: July 20, 2004

Print Candidate Name: ANDRE' UGIL

Candidates Signature: *Andre' E Ugil* Date: 7-21-04

DETAILED SUMMARY



Full Name of Committee/Person: CITIZENS to ELECT ANDRE'

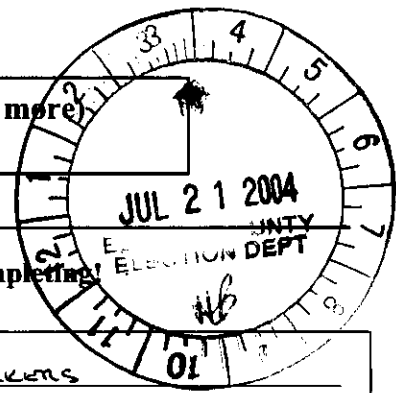
Current Reporting Period: 3-11-04 Through JULY 2004
AW 15 01

	Funds on hand at the beginning of reporting period (Monetary Only)	\$ - 0 -
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 1160.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ - 0 -
8	Loans Received (Please list on Schedule "C")	\$ - 0 -
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ - 0 - 0
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ - 0 -
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 1160.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$
13	Total Contributions (Line 11 + line 12)	\$ 1160.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 592.91 592.91
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ - 0 -
16	Loan Repayments Made (Please list on Schedule "C")	\$ - 0 -
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ - 0 -
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ - 0 -
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 592.91 592.91
20	Total Spending (Line 18 + line 19)	\$ 592.91 592.91

592.91

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

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



Full Name of Committee/Person: CITIZEN to ELECT. ANDRE' UGIL

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

PLEASE PRINT/TYPER

1. <u>Date Accepted</u> 6-21-04	4. Name (Last, First): <u>STATE CONF. OF ELECTRICAL WORKERS</u>
2. <u>Contribution Amt.</u> \$ 1,000.00	5. Address: <u>2150 NABBELE DR. RD.</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$	6. City/State/Zip: <u>Colo. SPRINGS Colo. 80904</u>
	7. Employer (if applicable, <u>mandatory</u>): _____
	8. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 6-16-04	4. Name (Last, First): <u>JIM ALISON SCOTT</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: _____
3. <u>Aggregate Amt.</u> (*Election Cycle) \$	6. City/State/Zip: <u>Colo. SPRINGS Colo.</u>
	7. Employer (if applicable, <u>mandatory</u>): _____
	8. Occupation (if applicable, <u>mandatory</u>): _____

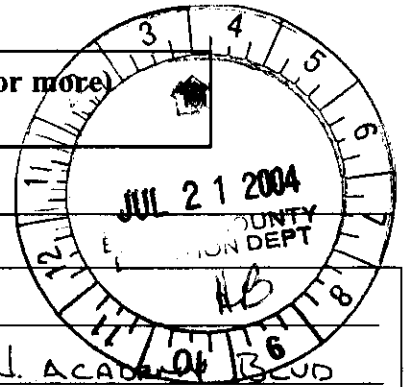
1. <u>Date Accepted</u> 6-16-04	4. Name (Last, First): <u>JUAN F. UGIL</u>
2. <u>Contribution Amt.</u> \$ 60.00	5. Address: <u>117 JUDSON DR</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$	6. City/State/Zip: <u>SECURITY Colo 80925</u>
	7. Employer (if applicable, <u>mandatory</u>): _____
	8. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</u> \$	5. Address: _____
3. <u>Aggregate Amt.</u> (*Election Cycle) \$	6. City/State/Zip: _____
	7. Employer (if applicable, <u>mandatory</u>): _____
	8. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</u> \$	5. Address: _____
3. <u>Aggregate Amt.</u> (*Election Cycle) \$	6. City/State/Zip: _____
	7. Occupation (if applicable, <u>mandatory</u>): _____
	8. Employer (if applicable, <u>mandatory</u>): _____

* Art. XXVIII, Sec. 2(6)

Schedule B – Itemized Expenditures Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]



Full Name of Committee/Person: ANDRE' UGIL

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 7-2-04	4. Name: <u>FAST SONS</u>
2. <u>Amount</u> \$ <u>289.03</u>	5. Address: <u>CITADEL CROSSING 975-D N. ACADEMY BLD</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colo. Springs Colo. 80909</u>
	7. Purpose of Expenditure: <u>SIGNS</u>

1. <u>Date Expended</u> 7-2-04	4. Name: <u>OFFICE DEPO</u>
2. <u>Amount</u> \$ <u>155.28</u>	5. Address: <u>1045 N. ACADEMY BLD</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colo. Springs Colo. 80909</u>
	7. Purpose of Expenditure: <u>OFFICE SUPPLIES</u>

1. <u>Date Expended</u> <u>7-16-04</u>	4. Name: <u>WALMART</u>
2. <u>Amount</u> \$ <u>166.37</u>	5. Address: <u>FTW Colo.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>FUND RAISER RALLY</u>

1. <u>Date Expended</u> <u>7-18</u>	4. Name: <u>MIKE MILE DINNER DEN. MTG.</u>
2. <u>Amount</u> \$ <u>100.00</u>	5. Address: <u>BRAINLUST</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colo. Springs</u>
	7. Purpose of Expenditure: <u>DEM / NEWS / FUNCTION</u>

1. <u>Date Expended</u> 7-3-04	4. Name: <u>HOME DEPOT</u>
2. <u>Amount</u> \$ <u>48.60</u>	5. Address: <u>2250 SOUTHGATE RD.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colo. Springs Colo. 80906</u>
	7. Purpose of Expenditure: <u>SIGNS COVERS</u>