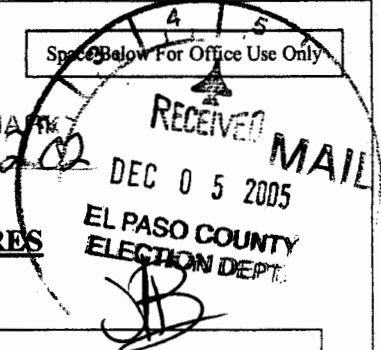


Colorado Secretary of State  
 Elections Division  
 1700 Broadway, Ste. 270  
 Denver, CO 80290  
 Ph: (303) 894-2200 x 3  
 Fax: (303) 869-4861  
 www.sos.state.co.us



Space Below For Office Use Only

POSTMARK  
 DATE: 12/05



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

Full Name of Committee/Person:	TEACHERS' COMMITTEE FOR EXCELLENCE IN EDUCATION <small>As Shown On Registration</small>
Address of Committee/Person:	2520 N. TEJON ST. STE 100
City, State & Zip Code:	COLORADO SPRINGS CO 80907
Committee Type:	ISSUE
Name and Address of Financial Institution	J.P. MORGAN CHASE BANK, 28 E. BOULDER, CO SPGS.

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:  Through   
date date

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

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 13,803.76
2	Total Monetary Contributions (line 11)	\$ 948.35
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 14,252.11
4	Total Monetary Expenditures (line 19)	\$ 1,232.06
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 13,020.11

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: NANCY HALEY  
 Registered Agent's (Treasurer's) Signature: *Nancy Haley* Date: 12/01/05  
 Print Candidate Name: \_\_\_\_\_  
 Candidates Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DETAILED SUMMARY**

Full Name of Committee/Person: TEACHERS' COMMITTEE FOR EXCELLENCE IN EDUCATION

Current Reporting Period: 10/7/05 Through 10/23/05

<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>		\$	<b>13,303.76</b>
6	<b>Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "A")	\$	—
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$	<b>401.42</b>
8	<b>Loans Received</b> (Please list on Schedule "C")	\$	—
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$	<b>546.93</b>
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$	—
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$	<b>948.35</b>
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$	—
13	<b>Total Contributions</b> (Line 11 + line 12)	\$	<b>948.35</b>
14	<b>Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "B")	\$	<b>1,232.00</b>
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$	—
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)	\$	<b>1,232.00</b>
20	<b>Total Spending</b> (Line 18 + line 19)	\$	<b>1,232.00</b>

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

Full Name of Committee/Person:	TEACHERS' COMMITTEE FOR EXCELLENCE IN EDUCATION <small>As Shown On Registration</small>
Address of Committee/Person:	2520 N. TETON STREET, STE 100
City, State & Zip Code:	COLORADO SPRINGS, CO 80907
Committee Type:	ISSUE
Name and Address of Financial Institution	J.P. MORGAN CHASE BANK, 28 E. BOULDER, CO. SPGS

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:  Through   
date date

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

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 13,020.11
2	Total Monetary Contributions (line 11)	\$ 448.28
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 13,464.39
4	Total Monetary Expenditures (line 19)	\$ 9,000.00
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 4,464.39

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: NANCY HALEY  
 Registered Agent's (Treasurer's) Signature: *Nancy Haley* Date: 12/01/05  
 Print Candidate Name: \_\_\_\_\_  
 Candidates Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DETAILED SUMMARY**

Full Name of Committee/Person: TEACHERS' COMMITTEE FOR EXCELLENCE IN EDUCATION

Current Reporting Period: 10/24/05 Through 11/26/05

	<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>	\$ 13,020.11
6	<b>Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "A")	\$ —
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$ 437.14
8	<b>Loans Received</b> (Please list on Schedule "C")	\$ —
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$ 7.14
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$ —
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$ 444.28
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$ —
13	<b>Total Contributions</b> (Line 11 + line 12)	\$ 444.28
14	<b>Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "B")	\$ 9,000.00
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$ —
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)	\$ 9,000.00
20	<b>Total Spending</b> (Line 18 + line 19)	\$ 9,000.00

**Schedule B – Itemized Expenditures Statement (\$20 or more)**

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

Full Name of Committee/Person: TEACHERS' COMMITTEE FOR EXCELLENCE IN EDUCATION

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>10/26/05</u>	4. Name: <u>GUDVANGEN FOR SCHOOL BOARD</u>
2. <u>Amount</u> \$ <u>3,000.00</u>	5. Address: <u>P.O. Box 7824</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80933-7824</u>
	7. Purpose of Expenditure: <u>CONTRIBUTION</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/26/05</u>	4. Name: <u>THE COMMITTEE TO ELECT TAMI HASLING</u>
2. <u>Amount</u> \$ <u>3,000.00</u>	5. Address: <u>P.O. Box 25593</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80936</u>
	7. Purpose of Expenditure: <u>CONTRIBUTION</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/26/05</u>	4. Name: <u>THE COMMITTEE TO ELECT SANDRA MANN</u>
2. <u>Amount</u> \$ <u>3,000.00</u>	5. Address: <u>P.O. Box 2462</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>COLORADO SPRINGS CO 80901</u>
	7. Purpose of Expenditure: <u>CONTRIBUTION</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

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