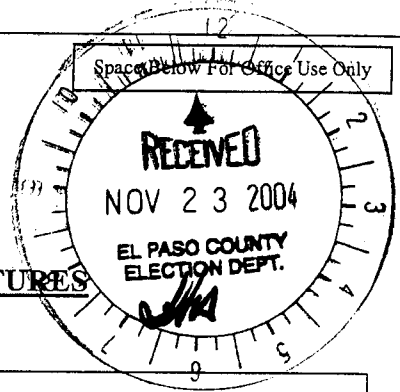


Colorado Secretary of State
Elections Division
1560 Broadway, Ste. 200
Denver, CO 80202
Ph: (303) 894-2200 x 3
Fax: (303) 869-4861
www.sos.state.co.us



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

| | |
|---|--|
| Full Name of Committee/Person: | Citizens for "1" LP <small>As Shown On Registration</small> |
| Address of Committee/Person: | 17584 Colonial Park Drive |
| City, State & Zip Code: | Monument, CO 80132 |
| Committee Type: | Issue Committee - School District Bond |
| Name and Address of Financial Institution | Wells Fargo, 481 Highway 105, Suite 214, Monument, CO |

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: 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) | \$ 3,849.19 |
| 2 Total Monetary Contributions (line 11) | \$ 84.22 |
| 3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2) | \$ 3,933.41 |
| 4 Total Monetary Expenditures (line 19) | \$ 3,933.41 |
| 5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4) | \$ - 0 - |

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.
[Art. XXVIII Sec. 10(2)(a)]

Authorization (Must be completed by either the Registered Agent OR the Candidate)

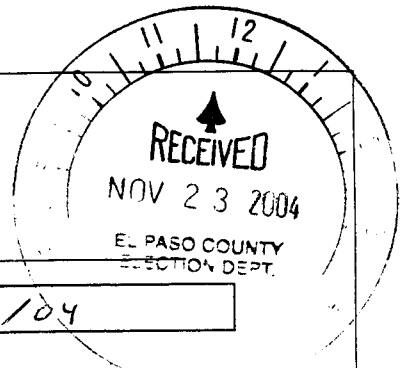
Print Registered Agent's (Treasurer's) Name: Steve Corder

Registered Agent's (Treasurer's) Signature: [Signature] Date: 11/20/04

Print Candidate Name: _____

Candidates Signature: _____ Date: _____

DETAILED SUMMARY



Full Name of Committee/Person: Citizens for "1" LP

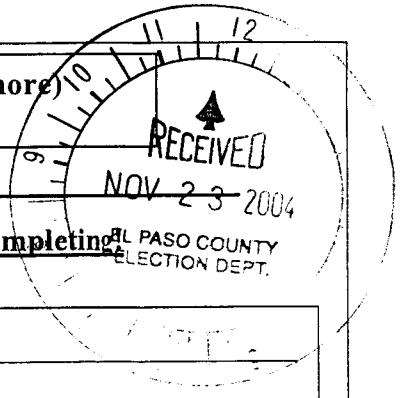
Current Reporting Period: 10/25/04 Through 11/30/04

| | | |
|----|--|--------------------|
| | Funds on hand at the beginning of reporting period (Monetary Only) | \$ <u>3,849.19</u> |
| 6 | Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A") | \$ <u>50.00</u> |
| 7 | Total of Non-Itemized Contributions (Contributions of \$19.99 and Less) | \$ <u>—</u> |
| 8 | Loans Received (Please list on Schedule "C") | \$ <u>—</u> |
| 9 | Total of Other Receipts (Interest, Dividends, etc.) | \$ <u>—</u> |
| 10 | Returned Expenditures (from recipient) (Please list on Schedule "D") | \$ <u>34.22</u> |
| 11 | Total Monetary Contributions (Total of lines 6 through 10) | \$ <u>84.22</u> |
| 12 | Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions) | \$ <u>—</u> |
| 13 | Total Contributions (Line 11 + line 12) | \$ <u>84.22</u> |
| 14 | Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B") | \$ <u>3,733.41</u> |
| 15 | Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less) | \$ <u>—</u> |
| 16 | Loan Repayments Made (Please list on Schedule "C") | \$ <u>—</u> |
| 17 | Returned Contributions (To donor) (Please list on Schedule "D") | \$ <u>200.00</u> |
| 18 | Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only) | \$ <u>—</u> |
| 19 | Total Monetary Expenditures (Total of lines 14 through 17) | \$ <u>3,933.41</u> |
| 20 | Total Spending (Line 18 + line 19) | \$ <u>3,933.41</u> |

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

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

Full Name of Committee/Person: Citizens for "1" LP



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

PLEASE PRINT/TYPE

| | |
|---|---|
| 1. <u>Date Accepted</u> 10/27/04 | 4. Name (Last, First): <u>Manning, Bob</u> |
| 2. <u>Contribution Amt.</u> \$ 50.00 | 5. Address: <u>1215 old Antlers way</u> |
| 3. <u>Aggregate Amt. *</u> \$ 50.00 | 6. City/State/Zip: <u>Monument, CO 80132</u> |
| | 7. Description: _____ |
| | 8. Employer (if applicable, <u>mandatory</u>): _____ |
| | 9. 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> \$ | 6. City/State/Zip: _____ |
| | 7. Description: _____ |
| | 8. Employer (if applicable, <u>mandatory</u>): _____ |
| | 9. 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> \$ | 6. City/State/Zip: _____ |
| | 7. Description: _____ |
| | 8. Employer (if applicable, <u>mandatory</u>): _____ |
| | 9. 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> \$ | 6. City/State/Zip: _____ |
| | 7. Description: _____ |
| | 8. Employer (if applicable, <u>mandatory</u>): _____ |
| | 9. Occupation (if applicable, <u>mandatory</u>): _____ |

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

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

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

RECEIVED
NOV 23 2004
COUNTY
CLERK'S OFFICE
ELECTIONS DEPT.

Full Name of Committee/Person: Citizens for "1" LP

PLEASE PRINT/TYPE

| | |
|---|--|
| 1. <u>Date Expended</u> 10/25/04 | 4. Name: <u>Tri-Lakes Printing</u> |
| 2. <u>Amount</u> \$ 1,542.72 | 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>Postage</u> |

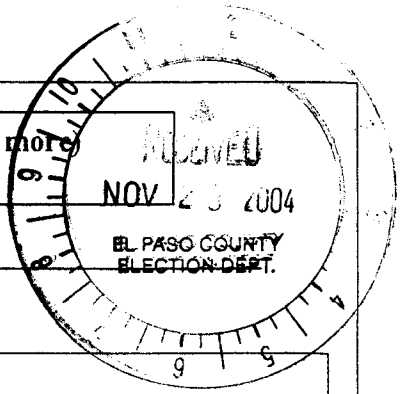
| | |
|---|---|
| 1. <u>Date Expended</u> 10/25/04 | 4. Name: <u>Tri-Lakes Tribune</u> |
| 2. <u>Amount</u> \$ 413.00 | 5. Address: <u>47 Third Street</u> |
| 3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee | 6. City/State/Zip: <u>Monument, CO 80132</u> |
| | 7. Purpose of Expenditure: <u>Advertising</u> |

| | |
|---|---|
| 1. <u>Date Expended</u> 10/26/04 | 4. Name: <u>Lewis-Palmer School District #38</u> |
| 2. <u>Amount</u> \$ 150.00 | 5. Address: <u>146 Jefferson Street</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>Facility Rental</u> |

| | |
|---|--|
| 1. <u>Date Expended</u> 10/26/04 | 4. Name: <u>Joanne Jensen</u> |
| 2. <u>Amount</u> \$ 62.87 | 5. Address: <u>2645 Mohawk Way</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>Reimbursement for refreshments</u> |

| | |
|---|---|
| 1. <u>Date Expended</u> 10/31/04 | 4. Name: <u>Our Community News</u> |
| 2. <u>Amount</u> \$ 303.50 | 5. Address: <u>P.O. Box 1742</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> |

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



Full Name of Committee/Person: Citizens for "1" LP

PLEASE PRINT/TYPE

| | |
|---|---|
| 1. <u>Date Expended</u> 11/1/04 | 4. Name: <u>Tri-Lakes Printing</u> |
| 2. <u>Amount</u> \$ <u>868.22</u> | 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>Printing & Copies</u> |

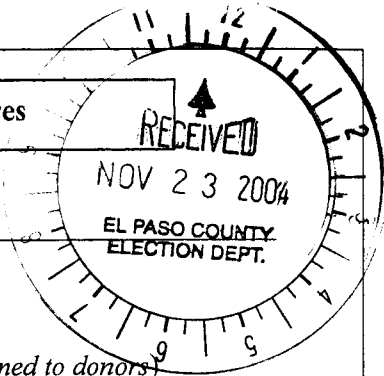
| | |
|---|---|
| 1. <u>Date Expended</u> 11/16/04 | 4. Name: <u>Lewis-Palmer High School</u> |
| 2. <u>Amount</u> \$ <u>393.10</u> | 5. Address: <u>1300 Higby Road</u> |
| 3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee | 6. City/State/Zip: <u>Monument, CO 80132</u> |
| | 7. Purpose of Expenditure: <u>Donation to Activities Fund</u> |

| | |
|---|----------------------------------|
| 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: _____ |

| | |
|---|----------------------------------|
| 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: _____ |

| | |
|---|----------------------------------|
| 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: _____ |

Schedule D – Returned Contributions & Expenditures



Full Name of Committee/Person: Citizens for "1" LP

Returned Contributions

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

PLEASE PRINT/TYPE

| | |
|-------------------------------------|---|
| 1. <u>Date Accepted</u> 10/20/04 | 4. Name (Last, First): <u>Eaton, Hugh</u> |
| 2. <u>Date Returned</u> 11/5/04 | 5. Address: <u>617 Forest View Ct.</u> |
| 3. <u>Amount</u> \$ 200.00 | 6. City/State/Zip: <u>Palmer Lake, CO 80133</u> |
| | 7. Purpose: <u>Donation not needed or used.</u> |

| | |
|-------------------------|------------------------------|
| 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)

PLEASE PRINT/TYPE

| | |
|-------------------------------------|--|
| 1. <u>Date Expended</u> 10/14/04 | 4. Name (Last, First): <u>Raintree, Jer</u> |
| 2. <u>Date Returned</u> 11/15/04 | 5. Address: <u>1120 Edenhurst Ct.</u> |
| 3. <u>Amount</u> \$ 34.22 | 6. City/State/Zip: <u>Monument, CO 80132</u> |
| | 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): _____ |