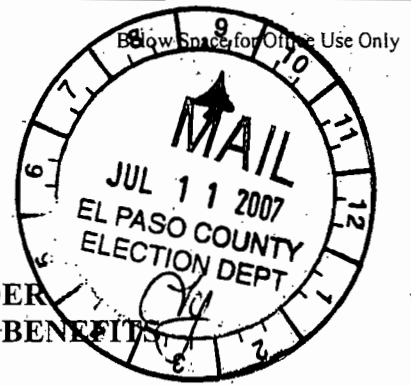


Colorado Secretary of State
Elections Division
1700 Broadway, Ste. 270
Denver, CO 80290
Ph: (303) 894-2200 x 3
Fax: (303) 869-4861



POSTMARK
DATE: 7/10



**DISCLOSURE BY PUBLIC OFFICEHOLDER
REPORT OF GIFTS, HONORARIA AND OTHER BENEFITS**
(C.R.S. 24-6-203)

Jurisdiction: (required) State County Municipal

Filing: (required) 1st Quarter (due April 15) 2nd Quarter (due July 15) 3rd Quarter (due October 15) 4th Quarter (due January 15)

Name of Officeholder: Robert "Bob" Balink (required) **Office Held/District:** El Paso County Clerk & Recorder (required)

Address: 912 N. Circle Dr. Ste 200 (required) **City:** Colorado Springs (required), **Colorado Zip:** 80909 (required)

1) Name of Person from Whom the Gift, Honoraria or Other Benefit Was Received:

NONE Amount/Value: \$ _____ Date Received: _____

Description: _____

2) Name of Person from Whom the Gift, Honoraria or Other Benefit Was Received:

NONE Amount/Value: \$ _____ Date Received: _____

Description: _____

3) Name of Person from Whom the Gift, Honoraria or Other Benefit Was Received:

_____ Amount/Value: \$ _____ Date Received: _____

Description: _____

4) Name of Person from Whom the Gift, Honoraria or Other Benefit Was Received:

_____ Amount/Value: \$ _____ Date Received: _____

Description: _____

Robert C. Balink
Signature of Officeholder
(required)

July 10, 2007
Date
(required)