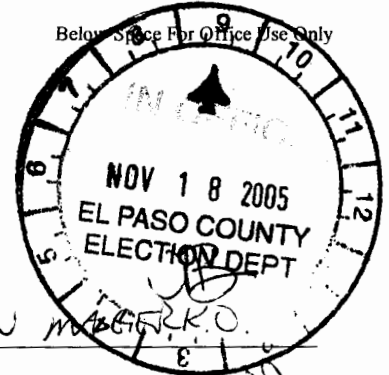


Colorado Secretary of State
Elections Division
1700 Broadway, Ste. 270
Denver, CO 80290
Ph: (303) 894-2200 x 3
Fax: (303) 869-4861
www.sos.state.co.us



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

Committee Name: COMMITTEE TO ELECT JOHN MAGERKO

Purpose/Office Sought: LEWIS PALMER D-38 SCHOOL BOARD

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 3.1 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): JOHN A. MAGERKO JR.
Address (Physical): 19495 MISTY MORNING DR, MONUMENT, CO 80132
Address (Mailing): 19495 MISTY MORNING DR, MONUMENT, CO 80132
Telephone No.: 719-488-3768 E-Mail: jmagerko@aol.com

Affiliation (if applicable): N/A

Check Only One Filing Type:

- Manual Filer
 Electronic Filer

Check Only One Jurisdiction:

- Federal State County
 Municipal Multi-County
 Other: D-38 SCHOOL DISTRICT

Authorization

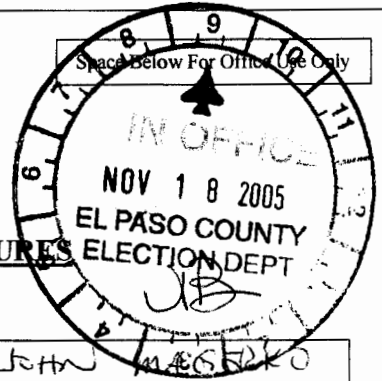
Registered Agent's (Treasurer's) Signature: John A. Magerko Jr. Date: OCT 28, 2005

Print Candidate Name: JOHN A. MAGERKO JR.

Candidate Address (include mailing): 19495 MISTY MORNING DR, MONUMENT, CO 80132

Candidate Signature: John A. Magerko Jr. Date: OCT 28, 2005

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

Full Name of Committee/Person:	Committee to Elect John Magerko As Shown On Registration
Address of Committee/Person:	1995 MISTY MORNING DR.
City, State & Zip Code:	MONUMENT, CO
Committee Type:	CANDIDATE COMMITTEE
Name and Address of Financial Institution	PEOPLES NATL BANK; 1899 WOODMOOR DR. MONUMENT, CO 80132

SOS ID NUMBER (state committees ONLY): N/A

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: OCT 24, 2005 Through NOV 26, 2005
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)	\$ 0.00
2	Total Monetary Contributions (line 11)	\$ 200.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 200.00
4	Total Monetary Expenditures (line 19)	\$ 200.00
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 0.00

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: JOHN A. MAGERKO JR.
Registered Agent's (Treasurer's) Signature: *John A. Magerko Jr.* Date: OCT 28, 2005
Print Candidate Name: JOHN A. MAGERKO JR.
Candidates Signature: *John A. Magerko Jr.* Date: OCT 28, 2005

DETAILED SUMMARY

Full Name of Committee/Person: COMMITTEE TO ELECT JOHN MAGERKO

Current Reporting Period: OCT 24, 2005 Through NOV. 24, 2005

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	0.00 xx
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	200.00 xx
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	0.00 xx
8	Loans Received (Please list on Schedule "C")	\$	0.00 xx
9	Total of Other Receipts (Interest, Dividends, etc.)	\$	0.00 xx
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$	0.00 xx
11	Total Monetary Contributions (Total of lines 6 through 10)	\$	200.00 xx
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	240.00 xx
13	Total Contributions (Line 11 + line 12)	\$	440.00 xx
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	200.00 xx
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)	\$	200.00 xx
20	Total Spending (Line 18 + line 19)	\$	200.00 xx

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

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

Full Name of Committee/Person: JOHN A. MAGERKO JR

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 17/28/05	4. Name (Last, First): <u>RAINTREE, JES</u>
2. <u>Contribution Amt.</u> \$ 150.00 XX	5. Address: <u>1120 EDENHURST CT.</u>
3. <u>Aggregate Amt. *</u> \$ 150.00 XX	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, <u>mandatory</u>): <u>RAINTREE DESIGNS</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>SELF EMPLOYED</u>

1. <u>Date Accepted</u> 17/28/05	4. Name (Last, First): <u>DEKLEVA, LOUANN</u>
2. <u>Contribution Amt.</u> \$ 50.00 XX	5. Address: <u>3380 HARMON ROAD</u>
3. <u>Aggregate Amt. *</u> \$ 50.00 XX	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, <u>mandatory</u>): <u>COLORADO SPRINGS SCHOOL DISTRICT 11</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>VOLUNTEER SERVICES ADMINISTRATOR</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: _____
<input type="checkbox"/> Check box if Electioneering Communication	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: _____
<input type="checkbox"/> Check box if Electioneering Communication	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).

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: JOHN A. MAGERKO JR.

PLEASE PRINT/TYPE

1. <u>Date Provided</u> 10/27/05	4. Name (Last, First): <u>MUNK, DIANE & PAUL</u>
2. <u>Fair Market Value</u> \$ 240.00 xx	5. Address: <u>19035 SPRING VALLEY ROAD</u>
3. <u>Aggregate Amt.</u> \$ 240.00 xx	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CAMPAIGN T-SHIRTS, 20 IN NUMBER, ABOUT \$12/T-SHIRT</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>US POST OFFICE (PAUL) / US AIR FORCE (DIANE)</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Admin (PAUL) / Admin (DIANE)</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 B – Itemized Expenditures Statement (\$20 or more)

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

Full Name of Committee/Person: COMMITTEE TO ELECT JOHN MAGERKO

PLEASE PRINT/TYPE

1. <u>Date Expended</u> NOV 18, 2005	4. Name: <u>JOHN A. MAGERKO JR.</u>
2. <u>Amount</u> \$ <u>200.00</u> ⁰⁰ / _{XX}	5. Address: <u>19495 MISTY MORNING DR.</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>\$164.97 FOR TRIBUNE AD ON 11/26</u> <input type="checkbox"/> Check box if Electioneering Communication <u>\$39.03 FOR EXPENSES</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: _____ <input type="checkbox"/> Check box if Electioneering Communication

CITED ON
 OCT 27 STATEMENT
 OF PERSONAL
 EXPENDITURES

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

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

Schedule C - Loans

Full Name of Committee/Person: COMMITTEE TO ELECT JOHN MAGERKO

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): NOT APPLICABLE

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

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: COMMITTEE TO ELECT JOHN MAGERKO

Returned Contributions

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

NET APPLICABLE

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)

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): _____