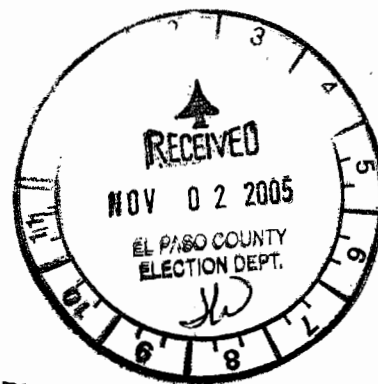


**PLANNED PARENTHOOD  
OF THE ROCKY MOUNTAINS**

A c t i o n F u n d



POSTMARK  
DATE: 11-1

**MAIL**

VIA FACSIMILE & U.S. MAIL

October 28, 2005

El Paso County Clerk & Recorder  
Elections Division  
200 South Cascade Avenue  
Colorado Springs, Co 80903

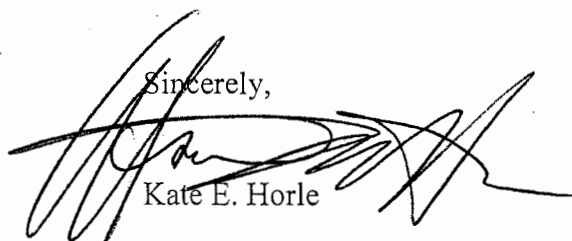
Re: Planned Parenthood of the Rocky Mountains  
Action Fund Political Committee

Dear Clerk:

I am attaching the required contributions and expenditures report for the Planned Parenthood of the Rocky Mountains Action Fund Political Committee. I have also attached paper copies of the committee registration form and amendment filed in accordance with C.R.S. §§ 1-45-109 (1) and (8).

Please contact me should you have any questions.

Sincerely,



Kate E. Horle

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:** PPRM ACTION FUND POLITICAL COMMITTEE

**Purpose/Office Sought:** See below

**Check Only One Committee Type:**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Candidate Committee            | <input type="checkbox"/> Political Party | <input type="checkbox"/> Small Donor Committee |
| <input checked="" type="checkbox"/> Political Committee | <input type="checkbox"/> 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.

1. Amend the committee name to Planned Parenthood of the Rocky Mountains Action Fund Political Committee
2. Amend the committee purpose to: Accepting and making contributions and expenditures to support John Gudvangen, Tami Hasling, and Sandra Mann for election to the El Paso County School District 11 Board of Directors.

**Contact Information:**

Name of Person Acting As Registered Agent (Treasurer): Kate E. Horle

Address (Physical): 950 Broadway, Denver, CO 80203

Address (Mailing): same

Telephone No.: (303) 321-7526      E-Mail: kate.horle@pprm.org

**Affiliation (if applicable):** N/A

**Check Only One Filing Type:**

- Manual Filer
- Electronic Filer

**Check Only One Jurisdiction:**

- |                                    |   |                                 |
|------------------------------------|---|---------------------------------|
| <input type="checkbox"/> Federal   | <input checked="" type="checkbox"/> State | <input type="checkbox"/> County |
| <input type="checkbox"/> Municipal | <input type="checkbox"/> Multi-County     |                                 |
| <input type="checkbox"/> Other:    | _____                                     |                                 |

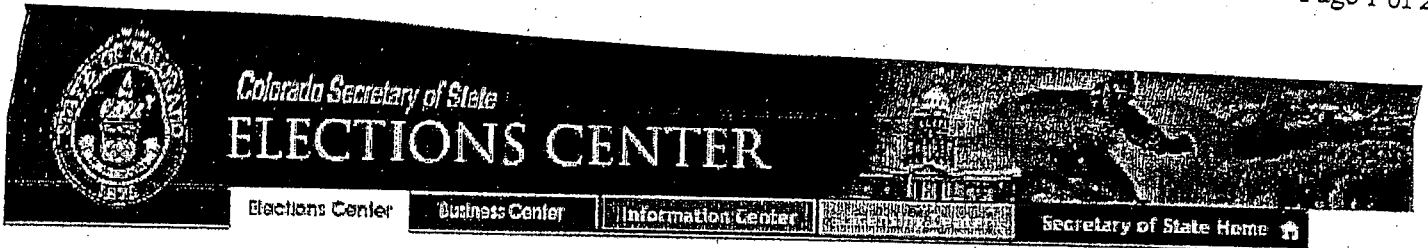
**Authorization**

Registered Agent's (Treasurer's) Signature: [Signature]      Date: 10/29/05

Print Candidate Name: N/A

Candidate Address (include mailing): \_\_\_\_\_

Candidate Signature: \_\_\_\_\_      Date: \_\_\_\_\_



Campaign Finance Home
Inquiry
Committee Registration
Search Committee Reports
Login

## Committee Registration

Please enter Committee Information and click 'Next' to continue registration. Please note: this form is for new registrations, NOT amendments.

### General Information:

Committee Type:

Full Name of Committee:

Street Address:

City:

State:

Zip Code:

Phone:

E-mail Address:

Web Site:

Jurisdiction (Choosing a county jurisdiction means that the committee will ONLY operate within that county. Otherwise STATEWIDE should be chosen):

Acronyms, Other Identifiers:

Purpose or Nature:

### Registered Agent Information:

Registered Agent Last Name:

Registered Agent First Name:

Registered Agent Middle Name:

Registered Agent Street Address:

Registered Agent City:

**PLANNED PARENTHOOD  
OF THE ROCKY MOUNTAINS**

A c t i o n F u n d



POSTMARK  
DATE: 11-1

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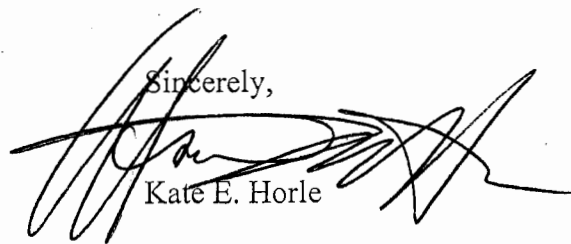
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Dear Clerk:

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Please contact me should you have any questions.

Sincerely,



Kate E. Horle

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:** PPRM ACTION FUND POLITICAL COMMITTEE

**Purpose/Office Sought:** See below

**Check Only One Committee Type:**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Candidate Committee            | <input type="checkbox"/> Political Party | <input type="checkbox"/> Small Donor Committee |
| <input checked="" type="checkbox"/> Political Committee | <input type="checkbox"/> 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.

- Amend the committee name to Planned Parenthood of the Rocky Mountains Action Fund Political Committee
- Amend the committee purpose to: Accepting and making contributions and expenditures to support John Gudvangen, Tami Hasling, and Sandra Mann for election to the El Paso County School District 11 Board of Directors.

**Contact Information:**

Name of Person Acting As Registered Agent (Treasurer): Kate E. Horle

Address (Physical): 950 Broadway, Denver, CO 80203

Address (Mailing): same

Telephone No.: (303) 321-7526 E-Mail: kate.horle@pprm.org

Affiliation (if applicable): N/A

**Check Only One Filing Type:**

- Manual Filer
- Electronic Filer

**Check Only One Jurisdiction:**

- |                                    |   |                                 |
|------------------------------------|---|---------------------------------|
| <input type="checkbox"/> Federal   | <input checked="" type="checkbox"/> State | <input type="checkbox"/> County |
| <input type="checkbox"/> Municipal | <input type="checkbox"/> Multi-County     |                                 |
| <input type="checkbox"/> Other:    | _____                                     |                                 |

**Authorization**

Registered Agent's (Treasurer's) Signature: [Signature] Date: 10/20/05

Print Candidate Name: N/A

Candidate Address (include mailing): \_\_\_\_\_

Candidate Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Campaign Finance
Home
Inquiry
Committee Registration
Search Committee Reports
Login

## Committee Registration

Please enter Committee information and click 'Next' to continue registration. Please note: this form is for new registrations, NOT amendments.

**General Information:**

**Committee Type:** POLITICAL COMMITTEE

**Full Name of Committee:** PPRM Action Fund Political Committee

**Street Address:** 950 Broadway

**City:** Denver

**State:** Colorado

**Zip Code:** 80203

**Phone:** (303) 321-7526

**E-mail Address:** kate.horle@pprm.org

**Web Site:** www.pprm.org

**Jurisdiction (Choosing a county jurisdiction means that the committee will ONLY operate within that county. Otherwise STATEWIDE should be chosen):** STATEWIDE

**Acronyms, Other Identifiers:** None

**Purpose or Nature:** Accepting and making contributions and expenditures to support candidates who support, and to oppose candidates who oppose, the mission of Planned Parenthood.

**Registered Agent Information:**

**Registered Agent Last Name:** Horle

**Registered Agent First Name:** Kate

**Registered Agent Middle Name:** E.

**Registered Agent Street Address:** 950 Broadway

**Registered Agent City:** Denver

Registered Agent State:

Registered Agent Zip Code:

Elections Center: 303 894 2200 • Fax: 303 869 4861 • e-mail: [sos.elections@sos.state.co.us](mailto:sos.elections@sos.state.co.us)



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PLANNED PARENTHOOD OF THE ROCKY  
MOUNTAINS ACTION FUND  
PUBLIC AFFAIRS DEPARTMENT  
950 BROADWAY  
DENVER, COLORADO 80203

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FACSIMILE TRANSMITTAL SHEET

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TO:	El Paso County Clerk and Recorder	FROM:	Kate E. Horle, Vice President Public Affairs
COMPANY:		DATE:	10/28/2005
FAX NUMBER:	1-719-520-7327	TOTAL NO. OF PAGES INCLUDING COVER:	4
		SENDER'S REFERENCE NUMBER:	303.813.7645
RE:	Report of Contributions and Expenditures	YOUR REFERENCE NUMBER:	

---

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URGENT     FOR REVIEW     PLEASE COMMENT     PLEASE REPLY     PLEASE RECYCLE

---

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NOTES/COMMENTS:

Report of Contributions and Expenditures by Planned Parenthood of the Rocky Mountains Action Fund Political Committee in El Paso County. Hard Copy of paperwork to follow.

Best, Kate Horle

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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

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

*Action Fund*

Full Name of Committee/Person:	Planned Parenthood Rocky Mountains Political Comm. <small>As Shown On Registration</small>
Address of Committee/Person:	950 Broadway
City, State & Zip Code:	Denver, CO 80203
Committee Type:	Political Committee
Name and Address of Financial Institution:	

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)	\$ 0
2	Total Monetary Contributions (line 11)	\$ 500
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 500
4	Total Monetary Expenditures (line 19)	\$ 0
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 500

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: Katherine Hobe  
 Registered Agent's (Treasurer's) Signature: [Signature] Date: 10/29/05  
 Print Candidate Name: \_\_\_\_\_  
 Candidates Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DETAILED SUMMARY**

Full Name of Committee/Person: Planned Parenthood of the Rocky Mountains Action Fund Political Committee

Current Reporting Period: Sept. 1, 2005 Through Oct. 31, 2005

	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")	\$ 500.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$
8	Loans Received (Please list on Schedule "C")	\$
9	Total of Other Receipts (Interest, Dividends, etc.)	\$
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 500.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$
13	Total Contributions (Line 11 + line 12)	\$ 500.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$
16	Loan Repayments Made (Please list on Schedule "C")	\$
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 0
20	Total Spending (Line 18 + line 19)	\$ 0

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

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

Full Name of Committee/Person: Planned Parenthood of the Rocky Mountains Action Fund Political Committee

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/26/05	4. Name (Last, First): <u>Planned Parenthood of the Rocky Mountains</u>
2. <u>Contribution Amt.</u> \$ 500.00	5. Address: <u>950 Broadway</u>
3. <u>Aggregate Amt. *</u> \$ 50.00	6. City/State/Zip: <u>Denver CO 80203</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>NON-PARTY health care provider</u>
	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> ): _____

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).