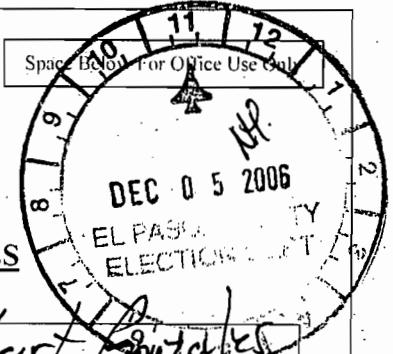


Colorado Secretary of State
 Elections Division
 1700 Broadway, Ste. 270
 Denver, CO 80290
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 Fax: (303) 869-4861
 www.sos.state.co.us



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

Full Name of Committee/Person: Committee to Elect Albert Gonzales
As Shown On Registration

Address of Committee/Person: 950 Broadview Pl

City, State & Zip Code: CS 80904

Committee Type: election

Name and Address of Financial Institution: ENT FCU

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: Nov. 24 2006 Through Nov. 30, 2006
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) | \$ <u>750⁰⁰</u> |
| 2 Total Monetary Contributions (line 11) | \$ <u>—</u> |
| 3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2) | \$ <u>—</u> |
| 4 Total Monetary Expenditures (line 19) | \$ <u>714⁰⁰</u> |
| 5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4) | \$ <u>36⁰⁰</u> |

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): I hereby certify and declare, under penalty of perjury, that to the best of my knowledge or belief all contributions received during this reporting period, including any contributions received in the form of membership dues transferred by a membership organization, are from permissible sources.

Print Registered Agent's Name: Albert Gonzales

Registered Agent's Signature: [Signature] Date: 12/5/06

Print Candidate Name: Albert Gonzales

Candidates Signature: [Signature] Date: 12/5/06

DETAILED SUMMARY

Full Name of Committee/Person: Committee to Elect Albert Gonzales

Current Reporting Period: 11/24/06 Through 12/30/06

| | | |
|--|---|----------------------|
| Funds on hand at the beginning of reporting period (Monetary Only) | | \$ |
| 6 | Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A") | \$ 0 |
| 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) | \$ |
| 12 | Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions) | \$ |
| 13 | Total Contributions (Line 11 + line 12) | \$ 0 |
| 14 | Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B") | \$ 714 ⁰⁰ |
| 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) | \$ 714 ⁰⁰ |
| 20 | Total Spending (Line 18 + line 19) | \$ 714 ⁰⁰ |

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

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

Full Name of Committee/Person: _____

PLEASE PRINT/TYPE

| | |
|--|--|
| 1. <u>Date Expended</u> 11/25/06 | 4. Name: <u>Gazette Telegraph</u> |
| 2. <u>Amount</u> \$ <u>594⁰⁰</u> | 5. Address: <u>30 S Prospect</u> <u>80903</u> |
| 3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee | 6. City/State/Zip: <u>C/S</u> |
| | 7. Purpose of Expenditure: <u>Print Ads</u> |
| | <input type="checkbox"/> Check box if Electioneering Communication |

| | |
|--|--|
| 1. <u>Date Expended</u> 11/25/06 | 4. Name: <u>HISPANIA News</u> |
| 2. <u>Amount</u> \$ <u>120⁰⁰</u> | 5. Address: <u>2527 Airport Road</u> |
| 3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee | 6. City/State/Zip: <u>C/S</u> <u>80910</u> |
| | 7. Purpose of Expenditure: <u>Print Ad</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 |

| | |
|---|--|
| 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 |