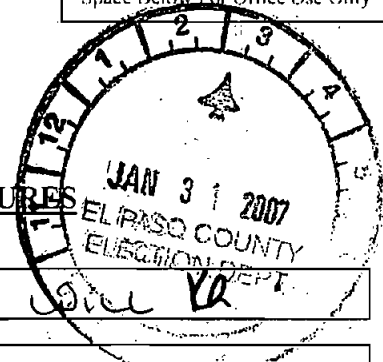


Colorado Secretary of State
 Elections Division
 1700 Broadway, Ste. 270
 Denver, CO 80290
 Ph: (303) 894-2200 x 3
 Fax: (303) 869-4861
 www.sos.state.co.us



Space Below For Office Use Only



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

Full Name of Committee/Person:	COMMITTEE TO ELECT WILL VA As Shown On Registration
Address of Committee/Person:	1012 SCARLET OAK DR. CO 80906
City, State & Zip Code:	COLO SPRGS, CO 80906
Committee Type:	CANDIDATE COMMITTEE
Name and Address of Financial Institution:	ENT FED CREDIT UNION PO BOX 15819 COS CO 80935

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) \$

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 3504.26
2	Total Monetary Contributions (line 11)	\$ 105.48
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 3609.74
4	Total Monetary Expenditures (line 19)	\$ 3609.74
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): 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: CINDEE WILL
 Registered Agent's Signature: Cindee Will Date: 1-31-07
 Print Candidate Name: SAME
 Candidates Signature: SAME Date: _____

DETAILED SUMMARY

Full Name of Committee/Person: CINDEE WILL

Current Reporting Period: NOV 27 2005 Through JAN 31 2007

	Funds on hand at the beginning of reporting period (Monetary Only)	\$ <u>3504²⁶</u>
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ <u>105⁴⁸</u>
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)	\$ <u>105⁴⁸</u>
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$
13	Total Contributions (Line 11 + line 12)	\$ <u>105⁴⁸</u>
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ <u>3609⁷⁴</u>
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)	\$ <u>3609⁷⁴</u>
20	Total Spending (Line 18 + line 19)	\$ <u>3609⁷⁴</u>

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

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

Full Name of Committee/Person: CINDEE WILL

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 1-31-07	4. Name: <u>EL PASO COUNTY CLERK + RECORDER</u>
2. <u>Amount</u> \$ <u>2450.00</u>	5. Address: <u>200 SO. CASCADE</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>COLO SPRS CO 80906</u>
	7. Purpose of Expenditure: <u>SANCTIONS</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 1-31-07	4. Name: <u>JAMES IRWIN CHARTER ELEMENTARY School</u>
2. <u>Amount</u> \$ <u>1159.74</u>	5. Address: <u>1626 SO. MURRAY BLVD</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>COLO SPRS CO 80906</u>
	7. Purpose of Expenditure: <u>DONATION</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