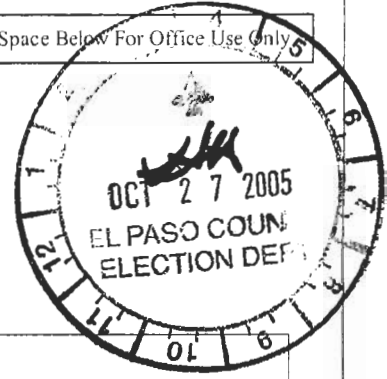


Colorado Secretary of State
 Elections Division
 1700 Broadway, Ste. 270
 Denver, CO 80290
 Ph: (303) 894-2200 x 3
 Fax: (303) 869-4861
 www.sos.state.co.us



Space Below For Office Use Only



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

Full Name of Committee/Person: Classrooms for Kids
As Shown On Registration

Address of Committee/Person: 210 Sarah Brittain Jack

City, State & Zip Code: 1779 Courtyard Heights CSC 80906

Committee Type: Issue

Name and Address of Financial Institution: First Bank 2 N. Cascade CSC 80903

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: October 7 Through October 23, 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 -
2 Total Monetary Contributions (line 11)	\$ 36,188.95
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 36,188.95
4 Total Monetary Expenditures (line 19)	\$ 23,979.34
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 12,209.61

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)

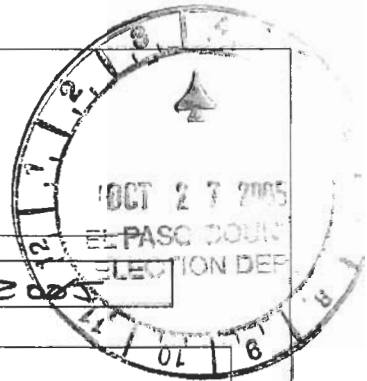
Print Registered Agent's (Treasurer's) Name: Don Magull

Registered Agent's (Treasurer's) Signature: [Signature] Date: 10/27/05

Print Candidate Name: _____

Candidates Signature: _____ Date: _____

DETAILED SUMMARY



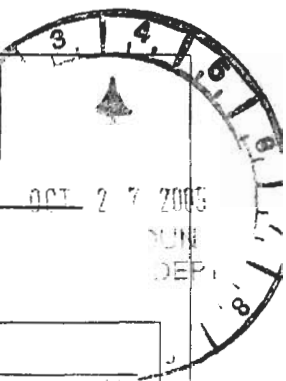
Full Name of Committee/Person: Classrooms for Kids

Current Reporting Period: 10-7-2005

Through 10-23-2005

	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")	\$	36,188.95
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	- 0 -
8	Loans Received (Please list on Schedule "C")	\$	- 0 -
9	Total of Other Receipts (Interest, Dividends, etc.)	\$	- 0 -
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$	- 0 -
11	Total Monetary Contributions (Total of lines 6 through 10)	\$	36,188.95
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	- 0 -
13	Total Contributions (Line 11 + line 12)	\$	36,188.95
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	23,979.34
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)	\$	23,979.34
20	Total Spending (Line 18 + line 19)	\$	23,979.34

Schedule A – Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]



Full Name of Committee/Person: Class Rooms for Kids

OCT 27 2005

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10-7-05	4. Name (Last, First): <u>Classic Homes</u>
2. <u>Contribution Amt.</u> \$5,000.00	5. Address: <u>6385 Corporate Drive no 200</u>
3. <u>Aggregate Amt. *</u> \$5,000.00	6. City/State/Zip: <u>CSC 80919</u>
	7. Description: <u>donation</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>Builder - Developer</u>

1. <u>Date Accepted</u> 10-7-05	4. Name (Last, First): <u>Campbell Companies</u>
2. <u>Contribution Amt.</u> \$2,000.00	5. Address: <u>4850 Austin Bluffs Pkwy</u>
3. <u>Aggregate Amt. *</u> \$2,000.00	6. City/State/Zip: <u>CSC 80918</u>
	7. Description: <u>donation</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>Builder</u>

1. <u>Date Accepted</u> 10-7-05	4. Name (Last, First): <u>Premier Homes</u>
2. <u>Contribution Amt.</u> \$1,000.00	5. Address: <u>200 West First Street no 200</u>
3. <u>Aggregate Amt. *</u> \$1,000.00	6. City/State/Zip: <u>Pueblo, CO 81003</u>
	7. Description: <u>donation</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>Builder</u>

1. <u>Date Accepted</u> 10-7-05	4. Name (Last, First): <u>Sand Creek Investments</u>
2. <u>Contribution Amt.</u> \$5,000.00	5. Address: <u>90 S Cascade Ave no 1500</u>
3. <u>Aggregate Amt. *</u> \$5,000.00	6. City/State/Zip: <u>CSC 80903</u>
	7. Description: <u>Donation</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>Builder</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).

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

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

Full Name of Committee/Person: Classrooms For Kids

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10-7-05	4. Name (Last, First): <u>GTL, Inc</u>
2. <u>Contribution Amt.</u> \$ 10,000.00	5. Address: <u>PO Box 80036</u>
3. <u>Aggregate Amt. *</u> \$ 10,000.00	6. City/State/Zip: <u>San Diego, CA</u> <u>92138</u>
	7. Description: <u>donation</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>Builder - Developer</u>

1. <u>Date Accepted</u> 10-7-05	4. Name (Last, First): <u>Nobility Homes</u>
2. <u>Contribution Amt.</u> \$ 5,000.00	5. Address: <u>7643 McLaughlin Rd.</u>
3. <u>Aggregate Amt. *</u> \$ 5,000.00	6. City/State/Zip: <u>Falcon, CO</u> <u>80831</u>
	7. Description: <u>donation</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>Builder</u>

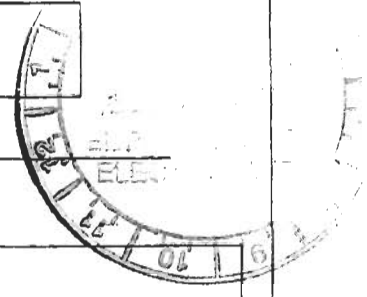
1. <u>Date Accepted</u> 10-7-05	4. Name (Last, First): <u>Don Magill - Magill Consulting</u>
2. <u>Contribution Amt.</u> \$ 3188.95	5. Address: <u>2 N. Cascade Ave</u>
3. <u>Aggregate Amt. *</u> \$ 3188.95	6. City/State/Zip: <u>CSC</u> <u>80903</u>
	7. Description: <u>donation</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>Consultant</u>

1. <u>Date Accepted</u> 10-7-05	4. Name (Last, First): <u>Mark Sheffel Business Center</u>
2. <u>Contribution Amt.</u> \$ 5,000.00	5. Address: _____
3. <u>Aggregate Amt. *</u> \$ 5,000.00	6. City/State/Zip: <u>CSC</u>
	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>Developer</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).

Schedule B - Itemized Expenditures Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Classroom for Kids



PLEASE PRINT/TYPE

1. <u>Date Expended</u> 10-7-05	4. Name: <u>Sarah B Jack & Assoc</u>
2. <u>Amount</u> \$ 3146.91	5. Address: <u>1779 Courtyard Heights</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>CSC 80906</u>
	7. Purpose of Expenditure: <u>Fees, Printing, Meetings</u>

1. <u>Date Expended</u> 10-7-05	4. Name: <u>Red Rock Strategies</u>
2. <u>Amount</u> \$ 12,000.00	5. Address: <u>PO Box 75567</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>CSC 80970</u>
	7. Purpose of Expenditure: <u>Phone Calls</u>

1. <u>Date Expended</u> 10-19-05	4. Name: <u>Sarah B Jack & Assoc</u>
2. <u>Amount</u> \$ 2832.43	5. Address: <u>1779 Courtyard Heights</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>CSC 80906</u>
	7. Purpose of Expenditure: <u>Printing, Meeting, Fees</u>

1. <u>Date Expended</u> 10-19-05	4. Name: <u>Red Rock Strategies</u>
2. <u>Amount</u> \$ 6,000.00	5. Address: <u>PO Box 75567</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>CSC 80970</u>
	7. Purpose of Expenditure: <u>Phone Calls</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: _____