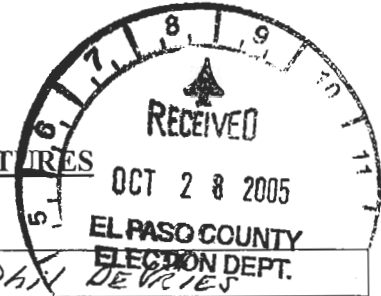


Colorado Secretary of State
 Elections Division
 1700 Broadway, Ste. 270
 Denver, CO 80290
 Ph: (303) 894-2200 x 3
 Fax: (303) 869-4861
 www.sos.state.co.us



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 PHIL DE VRIES
As Shown On Registration

Address of Committee/Person: 4736 OVERTURE CT.

City, State & Zip Code: COLORADO SPRINGS, CO 80906

Committee Type: CANDIDATE COMMITTEE

Name and Address of Financial Institution: THE BANK AT BROADMOOR
 155 LAKE AVE., COLORADO SPRINGS, 80906

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 12, 2005 Through October 21, 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)	\$ <u>285.61</u>
2 Total Monetary Contributions (line 11)	\$ <u>10,984.99</u>
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ <u>11,270.60</u>
4 Total Monetary Expenditures (line 19)	\$ <u>0.00</u>
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ <u>11,270.60</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)

Print Registered Agent's (Treasurer's) Name: TEO T. LEWIS

Registered Agent's (Treasurer's) Signature: Ted J. Lewis Date: 10/26/05

Print Candidate Name: Phil De Vries

Candidates Signature: [Signature] Date: 10/28/05

DETAILED SUMMARY

Full Name of Committee/Person: COMMITTEE TO ELECT PHIL DEVRIES

Current Reporting Period: OCTOBER 12, 2005 Through OCTOBER 21, 2005

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	285.61
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	10,984.99
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)	\$	10,984.99
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	_____
13	Total Contributions (Line 11 + line 12)	\$	10,984.99
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	0.00
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)	\$	0.00
20	Total Spending (Line 18 + line 19)	\$	0.00

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

Full Name of Committee/Person: COMMITTEE TO ELECT PHIL DEKRIES

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/10/05</u>	4. Name (Last, First): <u>TROOKMAN, CARRIE</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>340 CHESHIRE CT.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE</u>
	9. Occupation (if applicable, mandatory): <u>HOUSEWIFE</u>

1. Date Accepted <u>10/10/05</u>	4. Name (Last, First): <u>MARCIA GARDNER</u>
2. Contribution Amt. \$ <u>50</u>	5. Address: <u>715 POLLY DR.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE</u>
	9. Occupation (if applicable, mandatory): <u>HOUSEWIFE</u>

1. Date Accepted <u>10/10/05</u>	4. Name (Last, First): <u>LINDSAY E. FISCHER</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>55 MARLAND RD</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>SELF</u>
	9. Occupation (if applicable, mandatory): <u>ATTORNEY</u>

1. Date Accepted <u>10/10/05</u>	4. Name (Last, First): <u>BETSY SOBRAL</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>1775 BRANTFATHER GROVE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>none</u>
	9. Occupation (if applicable, mandatory): <u>HOUSEWIFE</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: Committee to Elect Phil DeVries

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/10/05</u>	4. Name (Last, First): <u>Becky McCord</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>3375 HYDEA DR.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>MARK REINICKE, DDS</u>
	9. Occupation (if applicable, mandatory): <u>DENTAL HYGIENIST</u>

1. Date Accepted <u>10/10/05</u>	4. Name (Last, First): <u>VINCENT H. CHASE</u>
2. Contribution Amt. \$ <u>50</u>	5. Address: <u>2657 Spring Grove Terrace</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE / RETIRED</u>
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/10/05</u>	4. Name (Last, First): <u>GARY O. LOO</u>
2. Contribution Amt. \$ <u>500</u>	5. Address: <u>17 17TH ST.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>High Valley Group</u>
	9. Occupation (if applicable, mandatory): <u>BUSINESSMAN</u>

1. Date Accepted <u>10/10/05</u>	4. Name (Last, First): <u>Richard Duncan</u>
2. Contribution Amt. \$ <u>25</u>	5. Address: <u>2413 Arickler Rd.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>KEY BANK</u>
	9. Occupation (if applicable, mandatory): <u>BANKER</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: COMMITTEE TO ELECT PHIL DELVRIES

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/10/05</u>	4. Name (Last, First): <u>JAMES M. JOHNSON</u>
2. Contribution Amt. \$ <u>250</u>	5. Address: <u>7 LAKE AVE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>G.E. JOHNSON CONSTRUCTION CO.</u>
	9. Occupation (if applicable, mandatory): <u>BUSINESSMAN</u>

1. Date Accepted <u>10/10/05</u>	4. Name (Last, First): <u>SUSAN B. TYSON</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>611 SOUTHERN CROSS DR.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE</u>
	9. Occupation (if applicable, mandatory): <u>HOUSEWIFE/HOMEMAKER</u>

1. Date Accepted <u>10/10/05</u>	4. Name (Last, First): <u>KATHERINE H. LOO</u>
2. Contribution Amt. \$ <u>250</u>	5. Address: <u>19 NORTHGATE RD.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE</u>
	9. Occupation (if applicable, mandatory): <u>HOMEMAKER</u>

1. Date Accepted <u>10/10/05</u>	4. Name (Last, First): <u>KENT A. BOWMAN</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>17 BROADMOOR AVE.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>JMB CONSTRUCTION CO.</u>
	9. Occupation (if applicable, mandatory): <u>BUSINESSMAN</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: Committee to Elect Phil DeVries

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/10/05	4. Name (Last, First): <u>Richard W. Moothart</u>
2. <u>Contribution Amt.</u> \$ 200	5. Address: <u>1300 Constellation Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>Colorado Springs Cardiologists PC</u>
	9. Occupation (if applicable, mandatory): <u>physician</u>

1. <u>Date Accepted</u> 10/10/05	4. Name (Last, First): <u>Jack K. Agee</u>
2. <u>Contribution Amt.</u> \$ 50	5. Address: <u>813 Mira Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>retired</u>
	9. Occupation (if applicable, mandatory): <u>Attorney at Law</u>

1. <u>Date Accepted</u> 10/10/05	4. Name (Last, First): <u>Richard J. Bean</u>
2. <u>Contribution Amt.</u> \$ 50	5. Address: <u>1 West Cheyenne Mountain Blvd.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>retired</u>
	9. Occupation (if applicable, mandatory): _____

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>Gerald G. Tolley</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>5 Westgate Rd.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>self</u>
	9. Occupation (if applicable, mandatory): <u>Attorney at Law</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: COMMITTEE TO ELECT PHIL BELVIES

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>LAWRENCE A. HECOX</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>53 MANLAND Rd</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>ATTORNEY</u>

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>Judith Sellers</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>2 Midland Rd.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>NONE</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>HOMEMAKER</u>

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>HAROLD U. LITRELL</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>502 BEAR AW LANE North</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>ARMED FORCES BANK</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BANKER</u>

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>PAMELA P. COOPER</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>370 Hidden Creek Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>HOMEMAKER</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: Committee to Elect Phil DeVries

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>KEVIN DIBBLE</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>2920 BONNE VISTA DR.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>self employed</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>computer programmer</u>

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>BLAKE WILSON</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>2584 PEGASUS DR.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>THE ART BANK</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESSMAN/OWNER</u>

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>MARILYN BURNETT</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>375 CARDIFF DR.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<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> 10/11/05	4. Name (Last, First): <u>MICHAEL S. HASSELL</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>2nd & Beech</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>BRUCE E. SHEPARD</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESSMAN</u>

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

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

Full Name of Committee/Person: Committee to Elect Phil DelVies

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>Sonya Norris</u>
2. <u>Contribution Amt.</u> \$ 50	5. Address: <u>2103 Constellation Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>United States Olympic Comm.</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Para-Olympic Coordinator</u>

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>Jeffrey S. George</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>770 Polux Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Hogan & Hartson LLP</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Attorney</u>

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>Carl P. Bonner, II</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>515 Southern Cross Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>Mark C. Van Horn</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>265 Stonebeck Lane</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>self employed</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Businessman/owner</u>

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

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

Full Name of Committee/Person: Committee to Elect Phil DelVeris

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>Kyle H. Hybl</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>25 Lowick Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>Broadmoor Hotel, Inc.</u>
	9. Occupation (if applicable, mandatory): <u>GENERAL COUNSEL</u>

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>John Glenn</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>2706 Andromeda</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>self</u>
	9. Occupation (if applicable, mandatory): <u>Attorney at Law</u>

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>Paul S. Nelson</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>2825 Halley's Ct.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>self employed</u>
	9. Occupation (if applicable, mandatory): <u>Certified Public Accountant</u>

1. <u>Date Accepted</u> 10/11/05	4. Name (Last, First): <u>JAMES KOMADINA</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>1135 Skylight View</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): <u>ENGINEER</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: Committee to Elect Phil DeVries

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/12/05	4. Name (Last, First): <u>Lynn Pattee</u>
2. <u>Contribution Amt.</u> \$ 250	5. Address: <u>2537 Pegasus Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE</u>
	9. Occupation (if applicable, mandatory): <u>HOMEMAKER</u>

1. <u>Date Accepted</u> 10/12/05	4. Name (Last, First): <u>WARREN DEVRIES</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>3730 Camelot Ridge Lane</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80904</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>self</u>
	9. Occupation (if applicable, mandatory): <u>Attorney at Law / Retired</u>

1. <u>Date Accepted</u> 10/12/05	4. Name (Last, First): <u>Philip A. Winslow</u>
2. <u>Contribution Amt.</u> \$ 200	5. Address: <u>2 Poplar St.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>Winslow BMW, Inc</u>
	9. Occupation (if applicable, mandatory): <u>BUSINESSMAN / OWNER</u>

1. <u>Date Accepted</u> 10/12/05	4. Name (Last, First): <u>Beth Meiers Sparks</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>1701 Constellation Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>KEENE & SPARKS ATTORNEYS</u>
	9. Occupation (if applicable, mandatory): <u>ATTORNEY AT LAW</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: Committee to Elect Phil Bellver

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/12/05</u>	4. Name (Last, First): <u>Fitzhugh, Lynne P.</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>1 Thayer Rd</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE</u>
	9. Occupation (if applicable, mandatory): <u>HOMEMAKER</u>

1. Date Accepted <u>10/12/05</u>	4. Name (Last, First): <u>AVIS, CAROLINE T.</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>1322 Cheyenne Rd</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>TESSA</u>
	9. Occupation (if applicable, mandatory): <u>EXECUTIVE</u>

1. Date Accepted <u>10/12/05</u>	4. Name (Last, First): <u>Howsam, Robert L., Jr.</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>48 Polo Dr.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>RETIRED</u>
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/12/05</u>	4. Name (Last, First): <u>Medved, Becky</u>
2. Contribution Amt. \$ <u>200</u>	5. Address: <u>8 BERTHE Circle</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE</u>
	9. Occupation (if applicable, mandatory): <u>HOMEMAKER</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: Committee to Elect Phil Bellver

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/12/05	4. Name (Last, First): <u>Stephen S. Ducoff</u>
2. <u>Contribution Amt.</u> \$ 50	5. Address: <u>1235 OAKMOOR Heights</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Billiard Congress of America</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Executive Director</u>

1. <u>Date Accepted</u> 10/12/05	4. Name (Last, First): <u>Osborne, Robert P.</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>17 Crossland Rd.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 10/12/05	4. Name (Last, First): <u>BRADEN, Ralph A., Sr.</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>3225 Cedar Heights Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Norwood Development Group</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Attorney</u>

1. <u>Date Accepted</u> 10/12/05	4. Name (Last, First): <u>McElhany, Andrew H.</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>2830 Orion Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>State of Colorado</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Senator, El Paso Co.</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: Committee to Elect Phil DeVries

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/12/05	4. Name (Last, First): <u>DEE, SARA J.</u>
2. <u>Contribution Amt.</u> \$ 50	5. Address: <u>2409 STRICKLER RD.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): <u>HOMEMAKER</u>

1. <u>Date Accepted</u> 10/12/05	4. Name (Last, First): <u>BURKETT, KHALE</u>
2. <u>Contribution Amt.</u> \$ 50	5. Address: <u>40 MARLAND RD.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>SELF EMPLOYED</u>
	9. Occupation (if applicable, mandatory): <u>REAL ESTATE AGENT</u>

1. <u>Date Accepted</u> 10/12/05	4. Name (Last, First): <u>RICHARD A. WALSH, III</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>1405 MESA AVE.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>PIRES PEAK UROLOGY, PC</u>
	9. Occupation (if applicable, mandatory): <u>PHYSICIAN</u>

1. <u>Date Accepted</u> 10/12/05	4. Name (Last, First): <u>LENZ, GEORGE A, II</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>2105 STRATTON FOREST HEIGHTS</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>CLASSIC HOMES</u>
	9. Occupation (if applicable, mandatory): <u>BUSINESSMAN / CFO</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: Committee to Elect Phil Sevier

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/12/05</u>	4. Name (Last, First): <u>KEENE, KENNETH P.</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>136 COBBLESTONE DR.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>KEENE + SPARKS</u>
	9. Occupation (if applicable, mandatory): <u>ATTORNEY AT LAW</u>

1. Date Accepted <u>10/12/05</u>	4. Name (Last, First): <u>Walsh, Christy</u>
2. Contribution Amt. \$ <u>25</u>	5. Address: <u>3150 SUNNY BROOK LANE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80904</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>KRDO-TV</u>
	9. Occupation (if applicable, mandatory): <u>NEWSPERSON/ANCHOR</u>

1. Date Accepted <u>10/12/05</u>	4. Name (Last, First): <u>Pradgett, Ina Kay</u>
2. Contribution Amt. \$ <u>10</u>	5. Address: <u>2620 Alder Point</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80904</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>The Patterson Group</u>
	9. Occupation (if applicable, mandatory): <u>Realtor</u>

1. Date Accepted <u>100</u>	4. Name (Last, First): <u>OSBORNE, MARY T.</u>
2. Contribution Amt. \$	5. Address: <u>3950 HERMITAGE DR.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>Self employed</u>
	9. Occupation (if applicable, mandatory): <u>Certified Public Accountant</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: Committee to Elect Phil DeVries

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/13/05	4. Name (Last, First): <u>BUELL, BRUCE</u>
2. <u>Contribution Amt.</u> \$ 50	5. Address: <u>2512 RIGEL DR.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>BUELL + EZELL, LLP</u>
	9. Occupation (if applicable, mandatory): <u>ATTORNEY AT LAW</u>

1. <u>Date Accepted</u> 10/13/05	4. Name (Last, First): <u>BLESSING, BUCK</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>102 N. CASCADE AVE.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80903</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>GRIFFS - BLESSING</u>
	9. Occupation (if applicable, mandatory): <u>BUSINESS MAN</u>

1. <u>Date Accepted</u> 10/15/05	4. Name (Last, First): <u>SPARKS, KENNETH</u>
2. <u>Contribution Amt.</u> \$ 150	5. Address: <u>314 W. DEL NORTE ST</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>SPARKS, WILSON, BORGES, BRANDT + JOHNSON, PC</u>
	9. Occupation (if applicable, mandatory): <u>ATTORNEY</u>

1. <u>Date Accepted</u> 10/13/05	4. Name (Last, First): <u>COGSWELL, MARTI</u>
2. <u>Contribution Amt.</u> \$ 25	5. Address: <u>2 MESA DANE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>SCHOOL DISTRICT 12</u>
	9. Occupation (if applicable, mandatory): <u>EXECUTIVE ASSISTANT</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: Committee to Elect Phil DeVRIES

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/13/05</u>	4. Name (Last, First): <u>ALEXANDER, FRANK H.</u>
2. Contribution Amt. \$ <u>50</u>	5. Address: <u>1101 JUPITER DR.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>retired</u>
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/13/05</u>	4. Name (Last, First): <u>SHEPARD, BRUCE E.</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>13 Crossland Rd.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>retired</u>
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/13/05</u>	4. Name (Last, First): <u>Lundquist, Jacqueline</u>
2. Contribution Amt. \$ <u>50</u>	5. Address: <u>1228 Wood Ave.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80903</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): <u>homemaker</u>

1. Date Accepted <u>10/13/05</u>	4. Name (Last, First): <u>CRESSWELL, CAROLYN B.</u>
2. Contribution Amt. \$ <u>50</u>	5. Address: <u>5 GENTRY LANE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE</u>
	9. Occupation (if applicable, mandatory): <u>Homemaker</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: Committee to Elect Phil Belvies

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/13/05	4. Name (Last, First): <u>COX, JAMES D.</u>
2. <u>Contribution Amt.</u> \$ <u>30 cash</u>	5. Address: <u>149 MIRAMAR DR.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 10/14/05	4. Name (Last, First): <u>KENNEDY, JAMISON D.</u>
2. <u>Contribution Amt.</u> \$ <u>100</u>	5. Address: <u>2542 PEGASUS DR.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>SELF</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>PHYSICIAN</u>

1. <u>Date Accepted</u> 10/14/05	4. Name (Last, First): <u>GULDOTT, NANCY LEE</u>
2. <u>Contribution Amt.</u> \$ <u>50</u>	5. Address: <u>2531 PEGASUS DR.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 10/14/05	4. Name (Last, First): <u>COBB, TERRY L.</u>
2. <u>Contribution Amt.</u> \$ <u>100</u>	5. Address: <u>610 ORION DR.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>RE-MAX</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BROKER - REAL ESTATE</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: Committee to Elect Phil DeVries

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/14/05	4. Name (Last, First): <u>Egan, Michele H.</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>1901 Stardust Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>N/A</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>homemaker</u>

1. <u>Date Accepted</u> 10/15/05	4. Name (Last, First): <u>Tibbs, Kimberly R.</u>
2. <u>Contribution Amt.</u> \$ 75	5. Address: <u>3110 Orion Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Mountain View Medical Group</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>physician</u>

1. <u>Date Accepted</u> 10/15/05	4. Name (Last, First): <u>KLEINER, CAROL</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>55 Second St.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>NONE</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>homemaker</u>

1. <u>Date Accepted</u> 10/15/05	4. Name (Last, First): <u>Hess, George C.</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>12155 Spine Creek Place</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80908</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Vantage Homes</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>BUSINESSMAN</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: Committee to Elect Phil DeVries

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/15/05	4. Name (Last, First): <u>MANOLD, RONALD J.</u>
2. <u>Contribution Amt.</u> \$ 50	5. Address: <u>580 PENROSE BLVD.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 10/17/05	4. Name (Last, First): <u>Donner, Robert, Jr.</u>
2. <u>Contribution Amt.</u> \$ 500	5. Address: <u>50 MARLAND Rd.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 10/18/05	4. Name (Last, First): <u>SCHONINGER, CHARLES</u>
2. <u>Contribution Amt.</u> \$ 200	5. Address: <u>1895 CANTWELL GROVE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>SELF EMPLOYED</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>REAL ESTATE DEVELOPER</u>

1. <u>Date Accepted</u> 10/18/05	4. Name (Last, First): <u>MUIR, LAURA J.</u>
2. <u>Contribution Amt.</u> \$ 50	5. Address: <u>4117 SAN FELICE PLACE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>SELF EMPLOYED/Muir Advertising</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>PUBLIC RELATIONS/OWNER</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: Committee to Elect Phil Seuries

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>Kilgore, Randy R.</u>
2. Contribution Amt. \$ <u>50</u>	5. Address: <u>4004 SAN FELICE PLACE</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>SELF EMPLOYED</u>
	9. Occupation (if applicable, mandatory): <u>INSURANCE BROKER</u>

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>STIEHL, GARY L.</u>
2. Contribution Amt. \$ <u>50</u>	5. Address: <u>1113 MILKY WAY</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>RETIRED</u>
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>Miller, Zoja</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>74 WEST CHEYENNE MOUNTAIN Blvd.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE</u>
	9. Occupation (if applicable, mandatory): <u>RETIRED</u>

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>Taloumis, Louis J.</u>
2. Contribution Amt. \$ <u>50</u>	5. Address: <u>5855 GLADSTONE ST</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>SELF EMPLOYED</u>
	9. Occupation (if applicable, mandatory): <u>Orthodontist</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: Committee to Elect Phil DeVries

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>10/18/05</u>	4. Name (Last, First): <u>FARICY, Patrick</u>
2. <u>Contribution Amt.</u> \$ <u>50</u>	5. Address: <u>10 Upland Rd</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Urological Associates, PC</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>physician</u>

1. <u>Date Accepted</u> <u>10/18/05</u>	4. Name (Last, First): <u>GAZIBARA, DONALD P.</u>
2. <u>Contribution Amt.</u> \$ <u>25</u>	5. Address: <u>14 LEARNING Rd.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>physician</u>

1. <u>Date Accepted</u> <u>10/18/05</u>	4. Name (Last, First): <u>Sung, Roger D.</u>
2. <u>Contribution Amt.</u> \$ <u>200</u>	5. Address: <u>185 BRIARCREST PLACE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>PREMIER ORTHOPEDICS</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>physician</u>

1. <u>Date Accepted</u> <u>10/18/05</u>	4. Name (Last, First): <u>Hybl, William J.</u>
2. <u>Contribution Amt.</u> \$ <u>50</u>	5. Address: <u>2 Penrose Lane</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80903</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>El Pomar Foundation</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>CHAIRMAN + CEO</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: Committee to Elect Phil DeVries

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>Suslow, STEVEN A.</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>536 Silver Date Grove</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>SELF EMPLOYED</u>
	9. Occupation (if applicable, mandatory): <u>BUSINESS MAN/COMPUTERS</u>

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>Roth, Richard L.</u>
2. Contribution Amt. \$ <u>50</u>	5. Address: <u>1120 Skylight View</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>RETIRED</u>
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>SIMON, JAMES A.</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>185 Polo Pony Dr.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>Urological Associates, P.C.</u>
	9. Occupation (if applicable, mandatory): <u>PHYSICIAN</u>

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>Tyson, Lauren K.</u>
2. Contribution Amt. \$ <u>200</u>	5. Address: <u>2611 Ashgrove St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

* 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: Committee to Elect Phil DeVries

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>WEILER, JOHN A</u>
2. Contribution Amt. \$ <u>50</u>	5. Address: <u>900 SATURN DR., UNIT 109</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>KELLER-WILLIAMS REALTY</u>
	9. Occupation (if applicable, mandatory): <u>REAL ESTATE AGENT</u>

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>NAUGHTON, THOMAS J.</u>
2. Contribution Amt. \$ <u>50</u>	5. Address: <u>36 BROADMOOR AVE.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>U.S. BANK</u>
	9. Occupation (if applicable, mandatory): <u>BANK OFFICER</u>

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>NAUGHTON, ANN J.</u>
2. Contribution Amt. \$ <u>50</u>	5. Address: <u>36 BROADMOOR AVE.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE</u>
	9. Occupation (if applicable, mandatory): <u>HOMEMAKER</u>

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>THATCHER, GREGORY L.</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>3 BROADMOOR AVE.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>1 THATCHER + ELLSWORTH</u>
	9. Occupation (if applicable, mandatory): <u>INVESTMENT ADVISOR</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: Committee to elect Phil DeVries

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>Hybl, William J., Jr.</u>
2. Contribution Amt. \$ <u>50</u>	5. Address: <u>655 Coveglen Ct.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>Griff - Blessing</u>
	9. Occupation (if applicable, mandatory): <u>business man</u>

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>THATCHER, PAMELA A.</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>3 Broadmoor Ave.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE</u>
	9. Occupation (if applicable, mandatory): <u>homemaker</u>

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>Lightcap, John H.</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>5705 Gladstone</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>Self employed</u>
	9. Occupation (if applicable, mandatory): <u>Commodity Trader</u>

1. Date Accepted <u>10/18/05</u>	4. Name (Last, First): <u>MARVIN, JAMES L.</u>
2. Contribution Amt. \$ <u>19.99</u>	5. Address: <u>3725 Chataway Ct.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>Retired</u>
	9. Occupation (if applicable, mandatory): _____

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

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

Full Name of Committee/Person: Committee to Elect Phil DeVries

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/18/05	4. Name (Last, First): <u>Biggs, Jerry S.</u>
2. <u>Contribution Amt.</u> \$ 100	5. Address: <u>330 Irvington Ct.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Biggs Kottford, CPA</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>ACCOUNTANT</u>

1. <u>Date Accepted</u> 10/19/05	4. Name (Last, First): <u>Roberts, Marilyn</u>
2. <u>Contribution Amt.</u> \$ 50	5. Address: <u>3724 Blue Marion Ct.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>NONE</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>HOMEMAKER</u>

1. <u>Date Accepted</u> 10/19/05	4. Name (Last, First): <u>Boyles, Richard W.</u>
2. <u>Contribution Amt.</u> \$ 150	5. Address: <u>7020 Switchback Trail</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80919</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Cukjati Design + Advertising</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>SALES PERSON</u>

1. <u>Date Accepted</u> 10/19/05	4. Name (Last, First): <u>Taylor, Margaret A.</u>
2. <u>Contribution Amt.</u> \$ 50	5. Address: <u>8 Polo Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>NONE</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>HOMEMAKER</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: Committee to elect Phil DeVries

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>10/19/05</u>	4. Name (Last, First): <u>ELLSWORTH, BRUCE</u>
2. <u>Contribution Amt.</u> \$ <u>100</u>	5. Address: <u>424 COBBLESTONE DR.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE</u>
	9. Occupation (if applicable, mandatory): <u>RETIRED</u>

1. <u>Date Accepted</u> <u>10/19/05</u>	4. Name (Last, First): <u>FERGUSON, CAROL</u>
2. <u>Contribution Amt.</u> \$ <u>100</u>	5. Address: <u>11 ELM AVE.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE</u>
	9. Occupation (if applicable, mandatory): <u>HOME MAKER</u>

1. <u>Date Accepted</u> <u>10/20/05</u>	4. Name (Last, First): <u>MOORE, GENE H.</u>
2. <u>Contribution Amt.</u> \$ <u>50</u>	5. Address: <u>5 CROSLAND RD.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>NONE - RETIRED</u>
	9. Occupation (if applicable, mandatory): <u>PHYSICIAN</u>

1. <u>Date Accepted</u> <u>10/20/05</u>	4. Name (Last, First): <u>LONG, MARK A.</u>
2. <u>Contribution Amt.</u> \$ <u>200</u>	5. Address: <u>897 MONT BLANC VIEW</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>SADDLETREE HOMES</u>
	9. Occupation (if applicable, mandatory): <u>BUSINESSMAN/HOME 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: Committee to Elect Phil Bellies

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>10/20/05</u>	4. Name (Last, First): <u>METZLER, Wesley V.</u>
2. <u>Contribution Amt.</u> \$ <u>50</u>	5. Address: <u>1810 Stardust Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Aikes Park Humane Society</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>EXECUTIVE DIRECTOR</u>

1. <u>Date Accepted</u> <u>10/20/05</u>	4. Name (Last, First): <u>RYAN, ERIC</u>
2. <u>Contribution Amt.</u> \$ <u>50</u>	5. Address: <u>230 Mayfield Lane</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>STICKMAN, KAST, RYAN & CO</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Certified Public Accountant</u>

1. <u>Date Accepted</u> <u>10/20/05</u>	4. Name (Last, First): <u>FORD, Stephen</u>
2. <u>Contribution Amt.</u> \$ <u>100</u>	5. Address: <u>65 Stanwell St.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Self employed</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Physician</u>

1. <u>Date Accepted</u> <u>10/21/05</u>	4. Name (Last, First): <u>LANE, MARGARET L.</u>
2. <u>Contribution Amt.</u> \$ <u>100</u>	5. Address: <u>1535 Culebra Lane</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80907</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>NONE</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>homemaker</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: Committee to Elect Phil Delveias

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/21/05</u>	4. Name (Last, First): <u>STRAIT, A. MARVIN</u>
2. Contribution Amt. \$ <u>300</u>	5. Address: <u>225 Spring Grove Way</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>RETIRED</u>
	9. Occupation (if applicable, mandatory): <u>ACCOUNTANT</u>

1. Date Accepted <u>10/21/05</u>	4. Name (Last, First): <u>ARMOUR, ANDREW W., IV</u>
2. Contribution Amt. \$ <u>200</u>	5. Address: <u>11 WEST CHEYENNE MT. Blvd.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>SELF EMPLOYED</u>
	9. Occupation (if applicable, mandatory): <u>INVESTOR</u>

1. Date Accepted <u>10/21/05</u>	4. Name (Last, First): <u>LANDOLFI, DOUGLAS</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>3820 Edgcliffe Ct.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Colorado Springs, CO 80904</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>DIGITAL CARE</u>
	9. Occupation (if applicable, mandatory): <u>BUSINESSMAN/OWNER</u>

1. Date Accepted	4. Name (Last, First): _____
2. Contribution Amt. \$	5. Address: _____
3. Aggregate Amt. * \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

* 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).