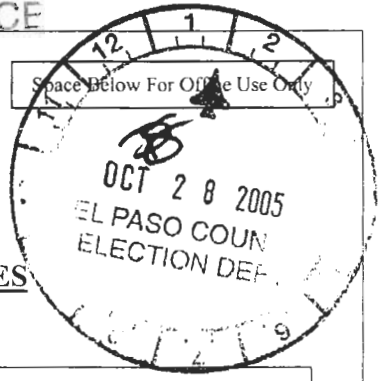


Colorado Secretary of State
Elections Division
1700 Broadway, Ste. 270
Denver, CO 80290
Ph: (303) 894-2200 x 3
Fax: (303) 869-4861
www.sos.state.co.us



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

Full Name of Committee/Person:	Paul Lastrella <small>As Shown On Registration</small>
Address of Committee/Person:	3450 E. Oak Creek Dr.
City, State & Zip Code:	CS, CO 80906
Committee Type:	
Name and Address of Financial Institution	UMB Bank of Colorado P.O. Box 22314, Denver, CO 80222

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)	\$ 83.92
2 Total Monetary Contributions (line 11)	\$ 585.00
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 668.92
4 Total Monetary Expenditures (line 19)	\$ 404.62
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 264.30

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)]

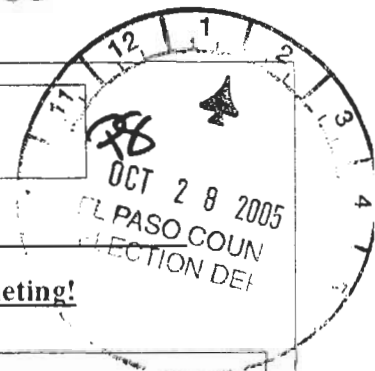
Authorization (Must be completed by either the Registered Agent OR the Candidate)

Print Registered Agent's (Treasurer's) Name: Lisa L. Dove

Registered Agent's (Treasurer's) Signature: Lisa L. Dove Date: 10-28-05

Print Candidate Name: _____

Candidates Signature: _____ Date: _____



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

Full Name of Committee/Person: Paul Lastrella

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

PLEASE PRINT/TYPE

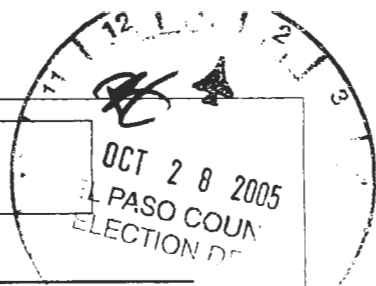
1. Date Accepted <u>10/11/05</u>	4. Name (Last, First): <u>Dixon, Lila</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>4434 Harwood Rd.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>C/S, CO 80916</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/11/05</u>	4. Name (Last, First): <u>Lastrella, Sunny</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>6944 S. Spruce Dr. East</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Centennial, CO 80012</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/11/05</u>	4. Name (Last, First): <u>Dove, Kevin</u>
2. Contribution Amt. \$ <u>25</u>	5. Address: <u>3722 Red Cedar Dr.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>C/S, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/11/05</u>	4. Name (Last, First): <u>Erye, Laurie</u>
2. Contribution Amt. \$ <u>35</u>	5. Address: <u>3460 Wimbrell Dr.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>C/S, CO 80906</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: Paul Lastralla

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

PLEASE PRINT/TYPE

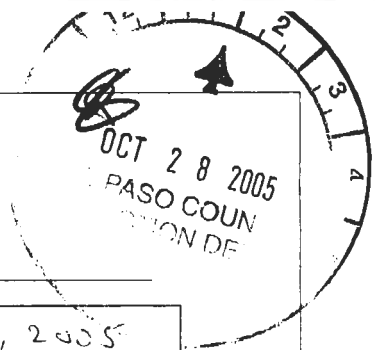
1. <u>Date Accepted</u> <u>10/14/05</u>	4. Name (Last, First): <u>Fletcher, Rita</u>
2. <u>Contribution Amt.</u> \$ <u>50</u>	5. Address: <u>12657 S.W. 26th St.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Miramar, Fl. 33027</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> <u>10/17/05</u>	4. Name (Last, First): <u>Mann, Mary</u>
2. <u>Contribution Amt.</u> \$ <u>25</u>	5. Address: <u>3237 Breckenridge Pr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>C/S, 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> <u>10/21/05</u>	4. Name (Last, First): <u>Realtor Candidate Political Action Committee</u>
2. <u>Contribution Amt.</u> \$ <u>250</u>	5. Address: <u>309 Inverness Way South</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Englewood, CO 801 80112</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>	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).



DETAILED SUMMARY

Full Name of Committee/Person: Paul Lastrelle

Current Reporting Period: Oct. 7, 2005

Through Oct 23, 2005

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	83.92
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	585.00
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)	\$	585.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	0
13	Total Contributions (Line 11 + line 12)	\$	585.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	404.62
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)	\$	404.62
20	Total Spending (Line 18 + line 19)	\$	404.62