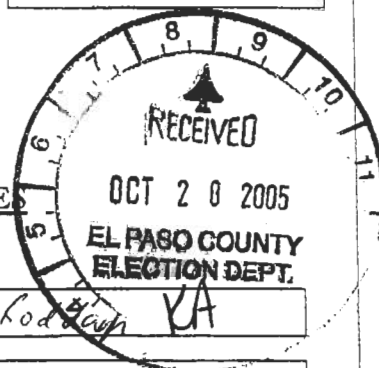


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Space Below For Office Use Only



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

Full Name of Committee/Person: Committee to Elect Thomas Roddham KA
As Shown On Registration

Address of Committee/Person: 1545 Langview Circle

City, State & Zip Code: Monument, CO 80132

Committee Type: School Board Election

Name and Address of Financial Institution: Peoples National Bank 1899 Woodmoor Dr.
Monument CO 80132

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)

Reporting Period Covered: 10/7/05 date **Through** 10/23/05 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>1,105.69</u>
2 Total Monetary Contributions (line 11)	\$ <u>- 0 -</u>
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ <u>1,105.69</u>
4 Total Monetary Expenditures (line 19)	\$ <u>867.54</u>
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ <u>238.15</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: Gina J. Hagglof

Registered Agent's (Treasurer's) Signature: Gina J Hagglof Date: 10/25/05

Print Candidate Name: Thomas Roddham

Candidates Signature: [Signature] Date: 10/25/05

DETAILED SUMMARY

Full Name of Committee/Person: Committee to Elect Thomas R. Idam

Current Reporting Period: 10/7/05 Through 10/23/05

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	1,105.69
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)	\$	- 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)	\$	- 0 -
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	- 0 -
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")	\$	867.54
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)	\$	867.54
20	Total Spending (Line 18 + line 19)	\$	867.54

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

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

Full Name of Committee/Person: Committee to Elect Thomas Lodden

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

PLEASE PRINT/TYPE

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: _____
	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: _____
	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: _____
	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: _____
	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

N/A (no contributions this reporting period)

* 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: Committee to Elect Thomas Roddam

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 10/12/05	4. Name: <u>Tri-lakes Printing</u>
2. <u>Amount</u> \$ 167.84	5. Address: <u>1752 Lake Woodman Dr.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Monument, CO 80132</u>
	7. Purpose of Expenditure: <u>Orange Flyers</u>

1. <u>Date Expended</u> 10/14/05	4. Name: <u>A.G.E. Graphics</u>
2. <u>Amount</u> \$ 425. ⁰⁰	5. Address: <u>52231 State Route 248</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Long Bottom, OH 45743</u>
	7. Purpose of Expenditure: <u>100 Signs</u>

1. <u>Date Expended</u> 10/14/05	4. Name: <u>The Tribune</u>
2. <u>Amount</u> \$ 119.40	5. Address: <u>1850 Woodman Dr.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Monument, CO 80132</u>
	7. Purpose of Expenditure: <u>Campaign Ad</u>

1. <u>Date Expended</u> 10/18/05	4. Name: <u>Tri-lakes Printing</u>
2. <u>Amount</u> \$ 8.39	5. Address: <u>1752 Lake Woodman Dr.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Monument CO 80132</u>
	7. Purpose of Expenditure: <u>Copies - 100 Bek & white flyers</u>

1. <u>Date Expended</u> 9 9/17/05	4. Name: <u>Deluxe checks</u>
2. <u>Amount</u> \$ 20.40	5. Address: <u>? Through Peoples National Bank ^{1899 Woodman Dr.} Monument CO 80132</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Monument CO 80132</u>
	7. Purpose of Expenditure: <u>Checks</u> <u>* Amt. was in 9/1/05 - 9/30/05 Bank start when was received the 1st week of Oct.</u>

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

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

Full Name of Committee/Person: Committee to Elect Thomas Roddau

PLEASE PRINT/TYPED

1. <u>Date Expended</u> 10/14/05	4. Name: <u>Thomas Roddau</u>
2. <u>Amount</u> \$ 126.51	5. Address: <u>1545 Longview Circle</u>
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Monument CO 80132</u>
	7. Purpose of Expenditure: <u>to get reimbursed for T.C. printing</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: _____

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: _____

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: _____

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: _____