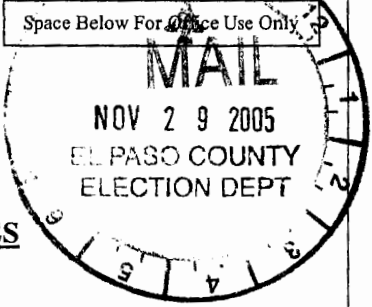


POSTMARK  
DATE: 11/28



Colorado Secretary of State  
Elections Division  
1560 Broadway, Ste. 200  
Denver, CO 80202  
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)

Space Below For Office Use Only

Full Name of Committee/Person:	Committee to Elect Larry Stanley <small>As Shown On Registration</small>
Address of Committee/Person:	12804 Fulford Ct.
City, State & Zip Code:	Colorado Springs, CO 80908
Committee Type:	Election Campaign
Name and Address of Financial Institution	Farmers State Bank, P.O. Box 9, Calhan, CO 80908

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:  Through   
date date

Declared Total Spending (if applicable) \$

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 695.25
2	Total Monetary Contributions (line 11)	\$ 100.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 795.25
4	Total Monetary Expenditures (line 19)	\$ 774.94
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 20.31

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)

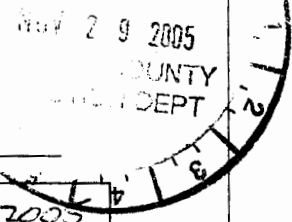
Print Registered Agent's (Treasurer's) Name: Jack Keen

Registered Agent's (Treasurer's) Signature: Jack H Keen Date: 11/26/05

Print Candidate Name: Lawrence A. Stanley

Candidates Signature: Lawrence A. Stanley Date: 11/26/05

**DETAILED SUMMARY**



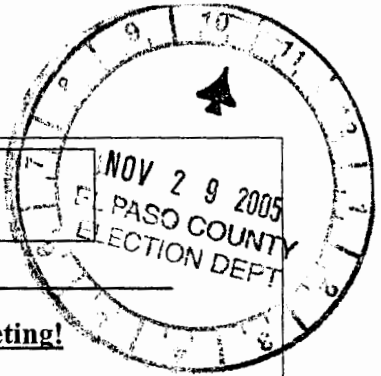
Full Name of Committee/Person: Committee to Elect Larry Stanley

Current Reporting Period: October 24, 2005 Through November 25, 2005

	<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>	\$	695.25
6	<b>Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "A")	\$	100.00
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$	0.00
8	<b>Loans Received</b> (Please list on Schedule "C")	\$	0.00
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$	0.00
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$	0.00
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$	100.00
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$	0.00
13	<b>Total Contributions</b> (Line 11 + line 12)	\$	100.00
14	<b>Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "B")	\$	774.94
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$	0.00
16	<b>Loan Repayments Made</b> (Please list on Schedule "C")	\$	0.00
17	<b>Returned Contributions (To donor)</b> (Please list on Schedule "D")	\$	0.00
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$	0.00
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$	774.94
20	<b>Total Spending</b> (Line 18 + line 19)	\$	774.94

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

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



Full Name of Committee/Person: Committee to Elect Larry Stanley

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 11/3/05	4. Name (Last, First): <u>Richard B and Shirley E. Ayer</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>12558 Meridian Rd.</u>
3. <u>Aggregate Amt. *</u> \$ 100.00	6. City/State/Zip: <u>Elbert, CO 80106</u>
	7. Description: <u>Check</u>
	8. Employer (if applicable, <u>mandatory</u> ): _____
	9. Occupation (if applicable, <u>mandatory</u> ): <u>Retired</u>

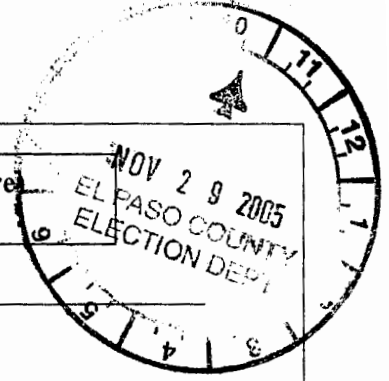
1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</u> \$	5. Address: _____
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: _____
	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u> ): _____
	9. Occupation (if applicable, <u>mandatory</u> ): _____

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> ): _____

\* 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 Larry Stanley

PLEASE PRINT/TYPE

1. Date Expended <u>10/31/05</u>	4. Name: <u>The Regent Group</u>
2. Amount \$ <u>199.94</u>	5. Address: <u>2031 N. 49th St.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Milwaukee, WI 53208</u>
	7. Purpose of Expenditure: <u>Telephone calls to constituents</u>

1. Date Expended <u>11/25/05</u>	4. Name: <u>Committee to Elect Anna Bartha</u>
2. Amount \$ <u>200.00</u>	5. Address: <u>4690 Ardley Dr.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs, CO 80922</u>
	7. Purpose of Expenditure: <u>Share of postage for final postcard</u>

1. Date Expended <u>11/25/05</u>	4. Name: <u>Jack Keen</u>
2. Amount \$ <u>375.00</u>	5. Address: <u>8345 Blue Gill Dr.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Falcon, CO 80831</u>
	7. Purpose of Expenditure: <u>Reimburse purchase of signs</u>

1. Date Expended	4. Name: _____
2. Amount \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____

1. Date Expended	4. Name: _____
2. Amount \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____