

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)

<b>Full Name of Committee/Person:</b>	TEACHERS' COMMITTEE FOR EXCELLENCE IN EDUCATION <small>As Shown On Registration</small>
<b>Address of Committee/Person:</b>	2520 N. TEJON ST., SUITE 100
<b>City, State &amp; Zip Code:</b>	COLORADO SPRINGS, CO 80907
<b>Committee Type:</b>	
<b>Name and Address of Financial Institution</b>	J.P. MORGAN CHASE BANK, 25 E. BOULDER, CO SPRGS.

**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:**  date **Through**  date

**Declared Total Spending** (if applicable) \$  [Art. XXVIII, Sec. 4(1)]

		Totals Detailed Summary Page
1	<b>Funds on Hand at the Beginning of Reporting Period</b> (monetary only)	\$ 5,888.17
2	<b>Total Monetary Contributions</b> (line 11)	\$ 4,440.59
3	<b>Total of Monetary Contributions &amp; Beginning Amount</b> (line 1 + line 2)	\$ 13,328.76
4	<b>Total Monetary Expenditures</b> (line 19)	\$ 25.00
5	<b>Funds on Hand at the End of Reporting Period</b> (monetary) (line 3 -- line 4)	\$ 13,303.76

**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)

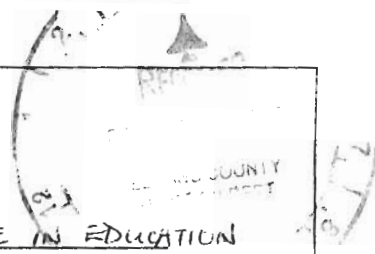
Print Registered Agent's (Treasurer's) Name: NANCY HALEY  
 Registered Agent's (Treasurer's) Signature: *Nancy Haley* Date: 10/11/05  
 Print Candidate Name: \_\_\_\_\_  
 Candidates Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DETAILED SUMMARY**

Full Name of Committee/Person: TEACHERS' COMMITTEE FOR EXCELLENCE IN EDUCATION

Current Reporting Period: 12/1/2004

Through 10/6/2005



	<b>Funds on hand at the beginning of reporting period</b> (Monetary Only)	\$ 8,888.17
6	<b>Itemized Contributions \$20 or More</b> [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ —
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$ 4,440.59
8	<b>Loans Received</b> (Please list on Schedule "C")	\$ —
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$ —
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$ —
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$ 4,440.59
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$ —
13	<b>Total Contributions</b> (Line 11 + line 12)	\$ 4,440.59
14	<b>Itemized Expenditures \$20 or More</b> [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 25.00
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$ —
16	<b>Loan Repayments Made</b> (Please list on Schedule "C")	\$ —
17	<b>Returned Contributions (To donor)</b> (Please list on Schedule "D")	\$ —
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$ —
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$ 25.00
20	<b>Total Spending</b> (Line 18 + line 19)	\$ 25.00

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

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

OCT 13 2005  
ELECTION DEPT.

**Full Name of Committee/Person:** TEACHERS' COMMITTEE FOR EXCELLENCE IN EDUCATION

**PLEASE PRINT/TYPE**

1. <u>Date Expended</u> <u>9/22/05</u>	4. Name: <u>MIKE COUGHLIN</u>
2. <u>Amount</u> \$ <u>25.00</u>	5. Address: <u>5415 CRYSTAL LOMA PI.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80915</u>
	7. Purpose of Expenditure: <u>REIMBURSE - ROOM RENTAL</u>
	<input type="checkbox"/> Check box if Electioneering Communication

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: _____
	<input type="checkbox"/> Check box if Electioneering Communication

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: _____
	<input type="checkbox"/> Check box if Electioneering Communication

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: _____
	<input type="checkbox"/> Check box if Electioneering Communication

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: _____
	<input type="checkbox"/> Check box if Electioneering Communication