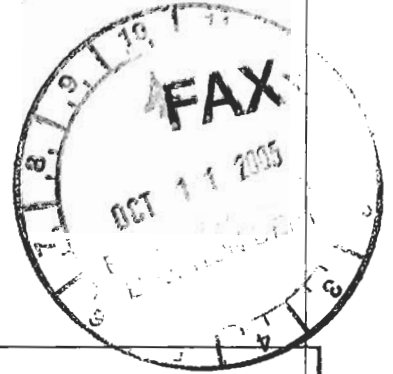


Fax Cover Sheet

Send to: El Paso County Clerk and Recorder	From: David A. Trujillo
Attention: Susan Ruso	Date: 10-11-05
Office Location: Election Department	Office Location: home
Fax Number: 520-7327	Phone Number: 719-683-8553

- Urgent
- Reply ASAP
- Please comment
- Please Review
- For your Information



Total pages, including cover: 6

Comments:

I hope this is correct?Please let us know...thanks....Dave Trujillo.

Colorado Secretary of State
 Elections Division
 1700 Broadway, Ste 270
 Denver, CO 80290
 Pb: (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: Colorado State Board of Election District A Trujillo

Committee to Elect David A. Tajillo
As Shown On Registration

Address of Committee/Person:	12670 Rio Lane
City, State & Zip Code:	Rayton, Co. 80831
Committee Type:	Candidate
Name and Address of Financial Institution	Ent Federal Credit Union P.O. Box 15919 CS, Co. 80935

SOS ID NUMBER (state committees ONLY): N/A

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: 09/08/05 Through 10/06/05
date date

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

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ <u>0</u>
2	Total Monetary Contributions (line 11)	\$ <u>379.99</u>
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ <u>379.99</u>
4	Total Monetary Expenditures (line 19)	\$ <u>352.47</u>
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ <u>27.52</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)]

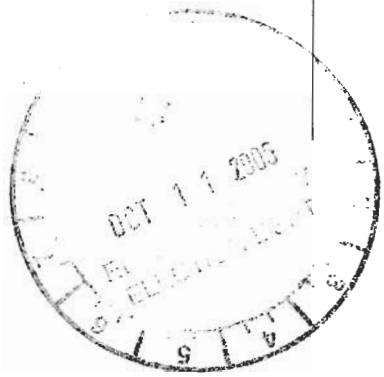
Authorization (Must be completed by either the Registered Agent OR the Candidate)

Print Registered Agent's (Treasurer's) Name: Deborah L. Manriquez

Registered Agent's (Treasurer's) Signature: [Signature] Date: 10-6-05

Print Candidate Name: David A. Tajillo

Candidates Signature: [Signature] Date: 10-6-05

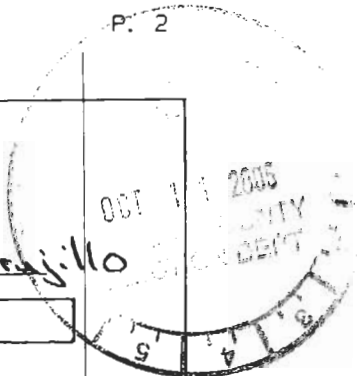


DETAILED SUMMARY

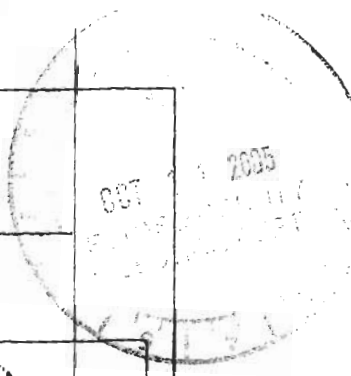
Full Name of Committee/Person: Committee to Elect David A. Trujillo

Current Reporting Period: 09/08/05

Through 10/06/05



	Funds on hand at the beginning of reporting period (Monetary Only)	\$	∅
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	350.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	29.99
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)	\$	379.99
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	∅
13	Total Contributions (Line 11 + line 12)	\$	379.99
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	351.47
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)	\$	351.47
20	Total Spending (Line 18 + line 19)	\$	351.47



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

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. Date Accepted 9/29/05	4. Name (Last, First): Trujillo, Ruben & Priscilla
2. Contribution Amt. \$ 100.00	5. Address: 2085 Pima Dr. Co
3. Aggregate Amt. *	6. City/State/Zip: Colorado Springs Co 80915
\$	7. Description: Check
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): "

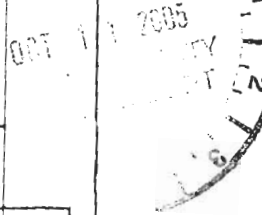
1. Date Accepted 9/29/05	4. Name (Last, First): Towe, Kenneth L. & Gwendolyn
2. Contribution Amt. \$ 125.00	5. Address: 6655 Athletic Ave.
3. Aggregate Amt. *	6. City/State/Zip: Windsor Colorado 80879
\$	7. Description: Check
	8. Employer (if applicable, mandatory): Retired
	9. Occupation (if applicable, mandatory): "

1. Date Accepted 10/1/05	4. Name (Last, First): Tom & DeAnna Montelongo
2. Contribution Amt. \$ 100.00	5. Address: 6536 Post Dr.
3. Aggregate Amt. *	6. City/State/Zip: Falcon Colorado 80919
\$	7. Description: Check
	8. Employer (if applicable, mandatory): Certa Diagnostics
	9. Occupation (if applicable, mandatory): RN

1. Date Accepted 10/4/05	4. Name (Last, First): Falcon Glass/Jodi Murphy
2. Contribution Amt. \$ 25.00	5. Address: 3150 Slacum Road
3. Aggregate Amt. *	6. City/State/Zip: Peyton, Co 80831
\$	7. Description: Check
	8. Employer (if applicable, mandatory): Falcon Glass
	9. Occupation (if applicable, mandatory): owner

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional rules: 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: _____

PLEASE PRINT/TYPE

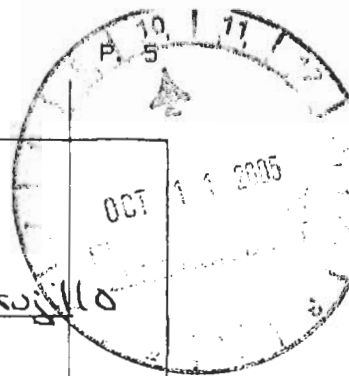
1. Date Expended 09/09/05	4. Name: El Paso County Clerk & Recorder
2. Amount \$ 163.25	5. Address: _____
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: CD of Registered Voters in D49

1. Date Expended 9/13/05	4. Name: Ent Federal Credit Union
2. Amount \$ 40.00	5. Address: P.O. Box 15819
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: C/S, Co. 80935
	7. Purpose of Expenditure: Open Checking & Savings Account

1. Date Expended 9/15/05	4. Name: XPEdex Paper Store
2. Amount \$ 47.12	5. Address: 2443 N. Union Blvd.
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: C/S, Co. 80909
	7. Purpose of Expenditure: Stationery

1. Date Expended 9/15/05	4. Name: FedEx Kinkos
2. Amount \$ 21.65	5. Address: 825 Citadel Dr.
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: C/S, Co. 80909
	7. Purpose of Expenditure: Copies

1. Date Expended 9/15/05	4. Name: Office Max
2. Amount \$ 24.69	5. Address: 7645 N. Academy Blvd.
3. Recipient is (optional): <input checked="" type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: C/S, Co. 80920
	7. Purpose of Expenditure: Stamp



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

Full Name of Committee/Person: Committee to Elect David A. Trujillo

PLEASE PRINT/TYPE

1. Date Expended: 9/21/05
2. Amount: \$ 54.76
3. Recipient is (optional): [X] Committee
4. Name: U.S. Postal Service
5. Address: 7425 McLaughlin Rd.
6. City/State/Zip: Peyton, Co. 80831
7. Purpose of Expenditure: Postage

1. Date Expended:
2. Amount:
3. Recipient is (optional):
4. Name:
5. Address:
6. City/State/Zip:
7. Purpose of Expenditure:

1. Date Expended:
2. Amount:
3. Recipient is (optional):
4. Name:
5. Address:
6. City/State/Zip:
7. Purpose of Expenditure:

1. Date Expended:
2. Amount:
3. Recipient is (optional):
4. Name:
5. Address:
6. City/State/Zip:
7. Purpose of Expenditure:

1. Date Expended:
2. Amount:
3. Recipient is (optional):
4. Name:
5. Address:
6. City/State/Zip:
7. Purpose of Expenditure: