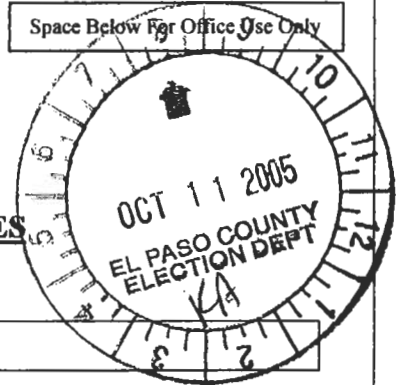


Colorado Secretary of State
 Elections Division
 1700 Broadway, Ste. 270
 Denver, CO 80290
 Ph: (303) 894-2200 x 3
 Fax: (303) 869-4861
 www.sos.state.co.us



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 Cindee Will <small>As Shown On Registration</small>
Address of Committee/Person:	5036 Old Fountain Blvd
City, State & Zip Code:	Colorado Springs, CO 80916
Committee Type:	
Name and Address of Financial Institution	ENT Federal Credit Union, PO Box 15819, COS, Colorado 80935

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	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 0
2	Total Monetary Contributions (line 11)	\$5081.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$5081.00
4	Total Monetary Expenditures (line 19)	\$2960.46
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 – line 4)	\$2120.54

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: Michelle Sears
Registered Agent's (Treasurer's) Signature: *Michelle Sears* Date: 10/11/05
Print Candidate Name: Cindee Will
Candidates Signature: _____ Date: _____

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

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

Full Name of Committee/Person: Committee to Elect Cindee Will

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 9/23/2005	4. Name: <u>United Postal Service</u>
2. <u>Amount</u> \$152.00	5. Address: <u>Pikes Peak and Nevada</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs, CO 80903</u>
	7. Purpose of Expenditure: <u>Postage</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 9/27/2005	4. Name: <u>Office Max</u>
2. <u>Amount</u> \$29.25	5. Address: <u>1640 Cheyenne Mountain</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
	7. Purpose of Expenditure: <u>Ink Cartridges, paper</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 9/27/2005	4. Name: <u>Post Office</u>
2. <u>Amount</u> \$370.00	5. Address: <u>Pikes Peak and Nevada</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs, CO 80903</u>
	7. Purpose of Expenditure: <u>Postage</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/01/2005	4. Name: <u>Post Office</u>
2. <u>Amount</u> \$130.00	5. Address: <u>Pikes Peak and Nevada</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs, CO 80903</u>
	7. Purpose of Expenditure: <u>Postage</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____

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

Full Name of Committee/Person: Committee to Elect Cindee Will

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 8/11/2005	4. Name: <u>Mountain Express Printing</u>
2. <u>Amount</u> \$760.39	5. Address: <u>501 Juanita Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs, CO 80909</u>
	7. Purpose of Expenditure: <u>Flyers</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 9/19/2005	4. Name: <u>El Paso County Clerk</u>
2. <u>Amount</u> \$400.00	5. Address: <u>200 S. Cascade</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs, CO 80901</u>
	7. Purpose of Expenditure: <u>Absentee Voter Roster</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/05/05	4. Name: <u>United States Postal Service</u>
2. <u>Amount</u> \$46.00	5. Address: <u>Pikes Peak and Nevada</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs, CO 80903</u>
	7. Purpose of Expenditure: <u>postage</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 9/21/2005	4. Name: <u>Rockrimmon Vision</u>
2. <u>Amount</u> \$27.00	5. Address: <u>1910 Vindicator Dr</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs, CO 80919</u>
	7. Purpose of Expenditure: <u>copies</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____

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

Full Name of Committee/Person: Committee to Elect Cindee Will

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 10/02/2005	4. Name: <u>Advantage Marketing</u>
2. <u>Amount</u> \$1,000	5. Address: <u>PO Box 76588</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs, Colorado 80970</u>
	7. Purpose of Expenditure: <u>Banner/ Yardsigns/Postcards</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: _____

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

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

Full Name of Committee/Person: Committee to Elect Cindee Will

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 9/01/05	4. Name (Last, First): <u>Elaine Maxwell</u>
2. <u>Contribution Amt.</u> \$50.00	5. Address: <u>5121 Lyda Drive</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, Colorado 80904</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> 9/24/05	4. Name (Last, First): <u>Stanley Lightfoot</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>1905 Payton Circle</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, Colorado 80915</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>): <u>Pastor</u>

1. <u>Date Accepted</u> 9/25/05	4. Name (Last, First): <u>Susan Dorris</u>
2. <u>Contribution Amt.</u> \$20.00	5. Address: <u>2920 Cedar Heights Drive</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, Colorado 80904</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Pikes Peak Comm. College</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Teacher</u>

1. <u>Date Accepted</u> 9/28/05	4. Name (Last, First): <u>Mary Ann Acker</u>
2. <u>Contribution Amt.</u> \$50.00	5. Address: <u>8750 NW HWY 225A</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Ocala, Florida 34482</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>): _____

* 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: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 9/08/05	4. Name (Last, First): <u>Rees, Mark</u>
2. <u>Contribution Amt.</u> \$500.00	5. Address: <u>4855 Langdale Way</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Self</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Business Owner</u>

1. <u>Date Accepted</u> 9/02/05	4. Name (Last, First): <u>Breazell, Willie</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>5780 Tomah Drive</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80918</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> 9/245	4. Name (Last, First): <u>Michelle Sears</u>
2. <u>Contribution Amt.</u> \$30.00	5. Address: <u>5036 Old Fountain Blvd</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80916</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Self</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Pre-school Teacher</u>

1. <u>Date Accepted</u> 9/11/05	4. Name (Last, First): <u>Denise Mund</u>
2. <u>Contribution Amt.</u> \$30.00	5. Address: <u>6560 Independence Way</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Arvada, CO 80004</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>CDE</u>
	9. Occupation (if applicable, <u>mandatory</u>): _____

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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. <u>Date Accepted</u> 9/12/05	4. Name (Last, First): <u>Cheyenne Mountain Republican Forum</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>PO Box 38092</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, 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> 9/23/05	4. Name (Last, First): <u>Sandi Elsberry</u>
2. <u>Contribution Amt.</u> \$20.00	5. Address: <u>3205 Oro Blanco Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80917</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> 9/24/05	4. Name (Last, First): <u>Gaylene Weber</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>635 Maroonglen Ct.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Cheyenne Mountain Charter Academy</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Teacher</u>

1. <u>Date Accepted</u> 9/24/05	4. Name (Last, First): <u>Jay Garvens</u>
2. <u>Contribution Amt.</u> \$500.00	5. Address: <u>1711 S. Canoe Creek Drive</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Self-Employed</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Business Owner/Consultant</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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: Committee to Elect Cindee Will

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 8/27/05	4. Name (Last, First): <u>Carol Romero</u>
2. <u>Contribution Amt.</u> \$40.00	5. Address: <u>890 Royal Crown Lane</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, 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> 8/23/05	4. Name (Last, First): <u>Susan Blake</u>
2. <u>Contribution Amt.</u> \$20.00	5. Address: <u>4105 Stepney Ct.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, 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> 8/23/05	4. Name (Last, First): <u>Ruth Donovan</u>
2. <u>Contribution Amt.</u> \$40.00	5. Address: <u>5575 Canvasback Ct.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80918</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> 8/29/05	4. Name (Last, First): <u>Andrew McElhany</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>2830 Orion Drive</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Colorado</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Senator</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).

Full Name of Committee/Person: Committee to Elect Cindee Will

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 8/19/2005	4. Name (Last, First): <u>Deborah Hartley</u>
2. <u>Contribution Amt.</u> \$500.00	5. Address: <u>24 Broadmoor Ave</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>None</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Homemaker</u>

1. <u>Date Accepted</u> 8/20/2005	4. Name (Last, First): <u>Tracy Nieves</u>
2. <u>Contribution Amt.</u> \$150.00	5. Address: <u>4707 Ranch Circle</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80918</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>District 12</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Teacher</u>

1. <u>Date Accepted</u> 8/25/05	4. Name (Last, First): <u>B. Christine Dellacroce</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>1005 Beta Loop</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>District 12</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Teaching Aide</u>

1. <u>Date Accepted</u> 8/23/05	4. Name (Last, First): <u>Kathy Hisey</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>6725 Athletic Ave.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80911</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>None</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>homemaker</u>

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

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

Full Name of Committee/Person: Committee to Elect Cindee Will

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 8/13/2005	4. Name (Last, First): <u>Kenneth Walker</u>
2. <u>Contribution Amt.</u> \$525.00	5. Address: <u>27814 Dogwood Glen</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Escondido, CA 92026</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Donation</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Self</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Realtor</u>

1. <u>Date Accepted</u> 8/15/2005	4. Name (Last, First): <u>Jay Garven</u>
2. <u>Contribution Amt.</u> \$500.00	5. Address: <u>1711 S. Canoe Creek Drive</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Self Employed</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Consultant</u>

1. <u>Date Accepted</u> 7/31/05	4. Name (Last, First): <u>Scott and Kerry Hall</u>
2. <u>Contribution Amt.</u> \$50.00	5. Address: <u>6045 Hardwick Drive</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, 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> 8/03/05	4. Name (Last, First): <u>Deborah Cole</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>4465 Gloucester Ct</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>James Irwin Charter Schools</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>teaching aide</u>

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

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

Full Name of Committee/Person: Committee To Elect Cindee Will

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 8/25/05	4. Name (Last, First): <u>Becky Sellon</u>
2. <u>Contribution Amt.</u> \$20.00	5. Address: <u>1052 Samuel Pt</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Wal-Mart</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Sales</u>

1. <u>Date Accepted</u> 8/28/05	4. Name (Last, First): <u>Regina Andrews</u>
2. <u>Contribution Amt.</u> \$20.00	5. Address: <u>1018 Scarlet Oak Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Army</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Nurse</u>

1. <u>Date Accepted</u> 8/24/05	4. Name (Last, First): <u>Kristan Rigdon</u>
2. <u>Contribution Amt.</u> \$40.00	5. Address: <u>1130 Glen Rock Dr</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80926</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Shields Realty</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Realtor</u>

1. <u>Date Accepted</u> 8/23/05	4. Name (Last, First): <u>Cheryl Sinclair</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>4255 Mercerwood Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Mercer Island, WA 98040</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Overlake Hospital Medical Center</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Nurse</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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: Committee to Elect Cindee Will

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 8/16/2005	4. Name (Last, First): <u>Leslie Schultz</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>2609 Willing Ave.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Fort Worth, TX 76110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Ft. Worth Schools</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Teacher</u>

1. <u>Date Accepted</u> 8/21/05	4. Name (Last, First): <u>Robert Blackmun</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>27469 Via Ramona</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>San Juan, Capistrano, CA 92675</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> 8/22/05	4. Name (Last, First): <u>Helen Will</u>
2. <u>Contribution Amt.</u> \$100.00	5. Address: <u>6877 Caminito Mundo Apt. 27</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>San Diego CA 92119</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>None</u>

1. <u>Date Accepted</u> 9/24/05	4. Name (Last, First): <u>Campagna, Ann</u>
2. <u>Contribution Amt.</u> \$25.00	5. Address: <u>804 Elliston Str.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80907</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>): _____

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

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

Full Name of Committee/Person: Committee to Elect Cindee Will

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 9/24/05	4. Name (Last, First): <u>Michael Berger</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>110 Balmoral Way</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80906</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Self-Employed</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

1. <u>Date Accepted</u> 9/04/05	4. Name (Last, First): <u>Barbara Sinclair</u>
2. <u>Contribution Amt.</u> \$250.00	5. Address: <u>3007 Chelton Dr.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80909</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> 9/02/05	4. Name (Last, First): <u>Marvin Will</u>
2. <u>Contribution Amt.</u> \$300.00	5. Address: <u>1285 E Washington, #128</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>El Cajon, CA 92019</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>None</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Retired</u>

1. <u>Date Accepted</u> 9/10/05	4. Name (Last, First): <u>Tammy Themel</u>
2. <u>Contribution Amt.</u> \$40.00	5. Address: <u>250 Vehr Dr</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80916</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>James Irwin Charter Schools</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>COO</u>

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

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

Full Name of Committee/Person: Committee to Elect Cindee Will

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 9/24/05	4. Name (Last, First): <u>Sears, Michelle</u>
2. <u>Contribution Amt.</u> \$30.00	5. Address: <u>5036 Old Fountain Blvd</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Colorado Springs, CO 80916</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>): _____

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>): _____

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>): _____

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DETAILED SUMMARY

Full Name of Committee/Person: Committee to Elect Cindee Will

Current Reporting Period: July 08, 2005 **Through:** October 06, 2005

	Funds on hand at the beginning of reporting period (Monetary Only)	\$ 0
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 4895.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 186.00
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)	\$ 5081.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 0
13	Total Contributions (Line 11 + line 12)	\$ 5081.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 2914.64
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 45.82
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)	\$ 2960.46
20	Total Spending (Line 18 + line 19)	\$ 2960.46

DETAILED SUMMARY
(as reported on Line 7, contributions)

Ice Cream Social on September 24, 2005:

Susan and Joe Dorris
Stan and Jan Lightfoot
Michelle Sears
Jann Millar
Steve and Terry Sprenger
Rhonda and Ron Cuusar
Elizabeth and Jonathan Berg
Campagna Family
Laurel Anderson
Carol Romero
Sarah Broerman
Tonya Betterson
Heather Sykes
Chris Dellocroce
Sandi Ellisberry
Deborah Hendrix
Jay and Marlo Garvens
Colin Mullaney
Kathy Hisey
Jennifer Kelly
Tiresa Lytle
Gaylene Weber
Tammy Themel
Keri Cotterman
Betsy Hiemstra
Jeff Leasure
Paula Leasure
Kerry and Scott Hall
Deborah Cole
Dr. Henry Blackwell
Total Contributions from Ice Cream Social -CASH: \$151.00

Other Contributions less than \$20:

Ann Winkler	9/13/05	\$10.00
Tina Leone	9/25/05	\$15.00
Kara Walker	9/12/05	\$10.00

Total Contributions: **\$35.00**

Grand Total Reported on Line 7 **\$186.00**

DETAILED SUMMARY
(Total as reported on Line 15-Expenditures)

County Clerk	\$5.00
Rockrimmon Vision	\$18.75
Fed-Ex Kinkos	\$1.60
Office Max	\$4.13
Ink Spot Printing	\$4.00
Fed Ex Kinkos	\$12.34
Total Expenditures	\$45.82