



**EL PASO COUNTY, COLORADO**  
OFFICE OF THE CLERK & RECORDER

**REPORT OF CONTRIBUTIONS AND EXPENDITURES**

For Candidate Committees, Political Party Committees, Issue Committees and Other Political Committees. FILE IN DUPLICATE.

NAME OF COMMITTEE (In Full):

Committee to Elect Craig Cox

ADDRESS OF COMMITTEE:

6530 Denim Dr. Col Spgs, CO 80918  
(Number/Street/City/State/Zip)

NAME AND ADDRESS OF FINANCIAL INSTITUTION:

Compass Bank 2805 Dublin Blvd. Col Spgs, CO 80918  
(Name) (Number/Street/City/State/Zip)

TYPE OF REPORT:

10/16/01 : 21 days prior to the election. Covering the period from the initial filing  
(Date) to 5 days prior to this filing.

\_\_\_\_\_ : Friday before the election. Covering the period from 5 days prior to the  
(Date) previous filing to 5 days prior to this filing.

\_\_\_\_\_ : 30 days after the election. Covering the period from 5 days prior to the  
(Date) previous filing to 5 days prior to this filing.

\_\_\_\_\_ : November 1 of off-year. Covering the period from 5 days prior to the  
(Date) previous filing to November 1.

: Termination Report

Is this report an amendment?  Yes  No

SUMMARY:	COLUMN A (This Period)	COLUMN B (Year to Date)
1. Funds on Hand Beginning of Reporting Period:	\$ 0.00	XXXXXXXXXXXXXXXXXX
2. Total Contributions (From Ln 13):	\$ 300.00	\$
3. Total Expenditures (From Ln 21):	\$ 217.00	\$
4. Funds on Hand at Close of Reporting Period:	\$ 117.00	XXXXXXXXXXXXXXXXXX
5. Debts/Obligations Owed by the Committee:	\$ —	XXXXXXXXXXXXXXXXXX
6. Pledges Owed to the Committee:	\$ 250.00	XXXXXXXXXXXXXXXXXX

CONTINUE TO PAGE 2

**DETAILED SUMMARY PAGE  
OF CONTRIBUTIONS AND EXPENDITURES**

Page 2

NAME OF COMMITTEE: Committee to Elect Craig Cox, D-11

<b>CONTRIBUTIONS:</b> (Please provide spreadsheet format for detail items. <sup>1</sup> )	<b>COLUMN A</b> (Total This Report)	<b>COLUMN B</b> (Calendar Year)
Contributions (other than loans) from: Individuals/Persons (Not Political Committees) Total Itemized (Use spreadsheet for Details "Schedule A"):		
7.	\$ 200.00	\$ 200.00
8. Non-Itemized (Total all Contributions Under \$20):	\$	\$
9. Political Party Committees:	\$	\$
10. Other Political Committees:	\$ 100.00	\$ 100.00
11. All Loans Received (Schedule C):	\$	\$
12. Other receipts (Dividends, Interest, Refunds, Rebates, Etc.):	\$	\$
13. <b>TOTAL CONTRIBUTIONS:</b> (Add all of the above items)	\$ 300.00	\$ 300.00
<b>EXPENDITURES:</b>		
14. Itemized Expenditures (\$20 and up) (Use Spreadsheet for Details "Schedule B"):	\$ 217.00	\$ 217.00
15. Total of Non-Itemized Expenditures:	\$	\$
16. Loan Repayments (Use "Schedule C"):	\$	\$
17. Refunds to Contributions:	XXXXXXXXXXXX	XXXXXXXXXX
18. Individuals/Persons other than Political Committees:	\$	\$
19. Political Party Committees:	\$	\$
20. Other Political Committees:	\$	\$
21. <b>TOTAL EXPENDITURES:</b> (Add all of the above items)	217.00	217.00

**OFFSETS TO OPERATING EXPENDITURES**(An offset to expenditures means a payment made by a third person to a third party for the benefit of any committee or party. Such goods and services are used directly or indirectly by the committee or party for its purposes. Use a similar spreadsheet for reporting these offsets. LISTING ONLY. DO NOT ADD TO CONTRIBUTIONS OR EXPENDITURES.

	<b>COLUMN A</b> (Total This Report)	<b>COLUMN B</b> (Calendar Year)
Total Itemized Offsets (\$20 and over):	\$	\$
Total Non-Itemized Offsets:	\$	\$

I certify that I have examined this Report of Contributions and Expenditures and to the best of my knowledge and belief it is true, correct and complete.

Craig W. Cox  
Type/Print Name of Agent

Craig W. Cox  
Signature of Agent

10/15/01  
Date

<sup>1</sup> The following is required for spreadsheet formats: Full name/address/zip; Name of Employer & Occupation; Date; Amount this Reporting Period; and Total Aggregate Year to Date. For expenditures, include the purpose of the expenditure. See attached examples of Schedules A and B.





**EL PASO COUNTY, COLORADO**  
OFFICE OF THE CLERK & RECORDER

**STATEMENT OF ITEMIZED CONTRIBUTIONS IN KIND**

Name of Committee (in Full):

Committee to Elect Craig Cox

Address:

6530 Denim Dr. Col Spgs, CO 80918 548-1988  
(Street) (City/State/Zip) (Phone)

Reporting Date: (If any reporting date falls on a weekend, the filing may be made the next business day.)

10/16/01 : 21 days prior to the election. Covering the period from the initial filing to 5  
(Date) prior to this filing.

\_\_\_\_\_ : Friday before the election. Covering the period from 5 days prior to the  
(Date) previous filing to 5 days prior to this filing.

\_\_\_\_\_ : 30 days after the election. Covering the period from 5 days prior to the  
(Date) previous filing to 5 days prior to this filing.

\_\_\_\_\_ : November 1 of off-year. Covering the period from 5 days prior to the  
(Date) previous filing to November 1.

Full Name, Address and Zip of Contributor	Fair Market Value	Date Received
1. <u>Wesley L. Cox</u> <u>698 Barbara Ct. Akron, OH 44319</u>	<u>\$ 200.00</u>	<u>9/20/01</u>
Contribution in kind for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify): <u>D-11 School Board</u>		
2. <u>Homed Building Association</u> <u>4585 Hilton Pkwy Col Spgs 80907</u>	<u>\$ 100.00</u>	<u>10/12/01</u>
Contribution in kind for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify): <u>D-11 School Board</u>		
3. _____	\$ _____	_____
Contribution in kind for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): _____		
4. _____	\$ _____	_____
Contribution in kind for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): _____		

I certify that I have examined this statement of contribution in kind and to the best of my knowledge and belief it is true, correct and complete.

Craig W. Cox  
(Type or Print Name of Agent)

Craig W. Cox  
(Signature of Agent)

10/15/01  
(Date)

Note: Willful or intentional submission of false, erroneous or incomplete information may be sanctioned as provided by law.



# EL PASO COUNTY, COLORADO

## OFFICE OF THE CLERK & RECORDER

### SCHEDULE A

### CONTRIBUTIONS (PAGE 1)

(This schedule should reflect each item [7 thru 12] of the Detailed Summary Page)

No information copied from such reports shall be sold or used by any person for the purpose of soliciting contributions or for any commercial purpose. CRS 1-45-111(1)(d).

Check  appropriate box(es):     Primary     General     Other (Specify):

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)	OCCUPATION/EMPLOYER:
C O X   W E S L E Y   L	R E T I R E D
ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)	DATE OF CONTRI:
6 9 8   B A R B A R A   C T   A K R O N   O H   4 4 3 1 9	0 9 2 0 0 1
AMT OF THIS CONTRIBUTION:	
	\$ 2 0 0 . 0 0
AGGREGATE YEAR TO DATE CONTRIBUTIONS:	
\$ 2 0 0 . 0 0	

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)	OCCUPATION/EMPLOYER:
H O M E 4   B U I L D I N G   A S S O C I A T	
ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)	DATE OF CONTRI:
4 5 7 5   H I L T O N   P K W Y   C O L   S P G S   C O   8 0 9 0 7	1 0 1 2 0 1
AMT OF THIS CONTRIBUTION:	
	\$ 1 0 0 . 0 0
AGGREGATE YEAR TO DATE CONTRIBUTIONS:	
\$ 3 0 0 . 0 0	

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)	OCCUPATION/EMPLOYER:
ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)	DATE OF CONTRI:
AMT OF THIS CONTRIBUTION:	
	\$ . . .
AGGREGATE YEAR TO DATE CONTRIBUTIONS:	
\$ . . .	



# EL PASO COUNTY, COLORADO

## OFFICE OF THE CLERK & RECORDER

### SCHEDULE B EXPENDITURES

(This schedule should reflect each item [14 thru 20] of the Detailed Summary Page.)

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Check  $\alpha$  appropriate boxes:  Primary  General  Other (Specify): D-H School Board

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
S I G M A L G R A P H I C S	1 5 1 8 N A C A D E M Y C O L S P G C O 8 0 9 0 9	\$ 1 0 . 0 0
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
C O P Y P O L I T I C A L F L Y E R S		0 9 0 7 0 1

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
E L P A S O C O U N T Y C L E R K		\$ 1 7 3 . 0 0
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
P U R C H A S E D I S C O F R E G I S T E R E D V O T E R S		

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
S I G M A L G R A P H I C S	1 5 1 8 N A C A D E M Y C O L S P G C O 8 0 9 0 9	\$ 3 4 . 0 0
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
P U R C H A S E P O L I T I C A L B U S I N E S S C A R D S		1 0 0 8 0 1

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
		\$ . 0 0
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE