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 EXPENDITUE (C.R.S. 1-45-108)

			ME TELEVILLE AND
Full Name of Committee/Person:	Gregory Garcia for District 1	1	
	As Shown On Registration		
Address of Committee/Person:	102 N. Cascade Avenue, Suit	e 400	
City, State & Zip Code:	Colorado Springs, CO 80903		
Committee Type:			
Name and Address of Financial Institution	American National Bank, 102	2 N.Cascao	le Ave., Colorado Springs, CO 80903
SOS ID NUMB	ER (state committees ONLY):		
ype of Report	L	•	· · · · · · · · · · · · · · · · · · ·
Regularly Scheduled Filing.			
Amended Filing. This amends prev	ious report filed on (date)		
Submit changes or new information ONLY			
Termination Report. (Termination I	Reports MUST Have a Monetary Balan	nce of Zero i	in Line 5)
Check this box if this Report Co			
— Cheek this box if this Report Co	mains electioneering comm	umcation	s mioi mation
eporting Period Covered: 01.07	07	Through	11.28.07
	Date		Date
Declared Total Spending (if applicable) Art. XXVIII, Sec. 4(1)]	3 <b>\$</b>		
	·.		Totals Detailed Summary Page
1 Funds on Hand at the Beginning of Reporting Period (monetary only)		\$ 2,128.23	
2 Total Monetary Contributions			\$ 2,100.00
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)		\$ 4,228.23	
4 Total Monetary Expenditures (line 19)		\$ 4,228.23	
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 – line 4)		\$ -0-	
runus on Hand at the End of N	ceporting reriod (monetary) (mie	3 - IIIIC 4)	φ -0-
The appropriate officer shall i	mpose a penalty of \$50 per da [Art. XXVIII Sec. 10(2)(	•	day that a report is filed late.
	[	. /1	
uthorization (Must be completed by eit	her the Registered Agent OR the Cand	lidate): I her	reby certify and declare, under nenalty of
			reby certify and declare, under penalty of reporting period, including any
erjury, that to the best of my knowledge of	r belief all contributions received	during this	reporting period, including any
erjury, that to the best of my knowledge on contributions received in the form of memb	or belief all contributions received bership dues transferred by a mem	during this	
erjury, that to the best of my knowledge of ontributions received in the form of memberint Registered Agent's Name:	or belief all contributions received bership dues transferred by a mem	during this	reporting period, including any canization, are from permissible sources.
erjury, that to the best of my knowledge of outributions received in the form of memberint Registered Agent's Name:  egistered Agent's Signature:	or belief all contributions received bership dues transferred by a mem Eric T. Ryan	during this	reporting period, including any
erjury, that to the best of my knowledge of intributions received in the form of memberint Registered Agent's Name:  egistered Agent's Signature:  cint Candidate Name:  G	ber belief all contributions received bership dues transferred by a mem  Eric T. Ryan  regory Garcia	during this	reporting period, including any canization, are from permissible sources.  Date: 12/3/07
erjury, that to the best of my knowledge of contributions received in the form of memberint Registered Agent's Name:  egistered Agent's Signature:  rint Candidate Name:  G	or belief all contributions received bership dues transferred by a mem Eric T. Ryan	during this	reporting period, including any canization, are from permissible sources.

## **DETAILED SUMMARY**

Full Name of Committee/Person: \_\_\_\_\_Gregory Garcia\_

**Current Reporting Period**:

01.07.07

Through

11.28.07

	•		
Funds on hand at the beginning of reporting period (Monetary Only)		\$ 2,128.23	
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 2,100.00	
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	
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)	\$ 2,100.00	
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	
13	Total Contributions (Line 11 + line 12)	\$ 2,100.00	
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 4,228.23	
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)	\$ 4,228.23	
20	Total Spending (Line 18 + line 19)	\$ 4,228.23	

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

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

ASO COUNTY ELECTION DEPT

Full Name of Committee/Person:

☐ Check box if

Electioneering Communication

I WANTE OF COMME	A DOME -
WARNING	S: Please read the instruction page for Schedule "A" before completing!
PLEASE PRINT/TYPE	
1. Date Accepted 2.2.07	4. Name (Last, First):Mary Ann Mason
2.2.07  2. Contribution Amt.	5. Address:6515 Gwin Rd
\$ 100.00	6. City/State/Zip: Oakland, CA 94611
3. Aggregate Amt. *	
\$ 100.00	7. Description:check
☐ Check box if	8. Employer (if applicable, mandatory):U C Berkley
Electioneering	9. Occupation (if applicable, mandatory):Dean
Communication	
1. Date Accepted	4. Name (Last, First):Barry J. Sobral
2.2.07	
2. Contribution Amt.	5. Address:36 Pourtales Road
\$ 500.00	6. City/State/Zip:Colorado Springs, CO 80906
3. <u>Aggregate Amt.</u> * \$ 500.00	7. Description:check
\$ 500.00	8. Employer (if applicable, mandatory):Retired
☐ Check box if	
Electioneering Communication	9. Occupation (if applicable, mandatory): Retired
1. Date Accepted	
	4. Name (Last, First):Stephen M. Schuck
3.28.07 2. Contribution Amt.	5. Address: 2 N. Cascade Ave., Suite 1280
\$ 1,500.00	
3. Aggregate Amt. *	6. City/State/Zip:Colorado Springs, CO 80903
\$ 1,500.00	7. Description:check
☐ Check box if	8. Employer (if applicable, mandatory):Schuck Corp
Electioneering	9. Occupation (if applicable, mandatory):Real Estate Developer
Communication	
1. Date Accepted	A Name of the Property of the
	4. Name (Last, First):
2. Contribution Amt.	5. Address:
\$	6. City/State/Zip:
3. Aggregate Amt. *	7. Description:
, <b>Ψ</b>	8 Employer (if applicable mandatory):

\* 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).

9. Occupation (if applicable, mandatory):

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

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

EL PASO COUNTY

ELECTION DEPT

Full Name of Committee/Person: ELECTION DEPT				
PLEASE PRINT/TYPE				
1. Date Expended	4. Name: Gregory Garcia			
08.01.07	4. NameGregory Garcia			
2. Amount	5. Address:5460 Wills Fargo Drive			
\$ 4,128.23 3.Recipient is (optional):	6. City/State/Zip:Colorado Springs, CO 80918			
Committee	7. Purpose of Expenditure:reimbursement of campaign expenses			
☐ Non-Committee	☐ Check box if Electioneering Communication			
	Check box it Electioneering Communication			
1. <u>Date Expended</u> 11.01.07	4. Name:Gregory Garcia			
2. Amount	5. Address:5460 Wells Fargo Drive			
\$ 100.00  3.Recipient is (optional):	6. City/State/Zip:Colorado Springs, CO 80918			
Committee	7. Purpose of Expenditure:reimbursement of campaign expenses			
☐ Non-Committee	☐ Check box if Electioneering Communication			
1. Date Expended	4. Name:			
2. Amount	5. Address:			
\$ 3.Recipient is (optional):	6. City/State/Zip:			
☐ Committee	7. Purpose of Expenditure:			
☐ Non-Committee	☐ Check box if Electioneering Communication			
1. Date Expended	,			
,	4. Name:			
2. Amount	5. Address:			
\$ 3.Recipient is (optional):	6. City/State/Zip:			
Committee	7. Purpose of Expenditure:			
☐ Non-Committee	☐ Check box if Electioneering Communication			
1 Deta F	— Committee of the second and the se			
1. Date Expended	4. Name:			
2. Amount	5. Address:			
\$ 3.Recipient is (optional):	6. City/State/Zip:			
Committee	7. Purpose of Expenditure:			
☐ Non-Committee	☐ Check box if Electioneering Communication			
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