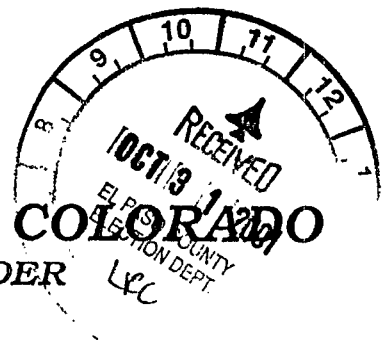




**EL PASO COUNTY, COLORADO**  
OFFICE OF THE CLERK & RECORDER



**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 Kathleen M Dillon

ADDRESS OF COMMITTEE:

15935 Rhodes Pl Elbert CO 80106  
(Number/Street/City/State/Zip)

NAME AND ADDRESS OF FINANCIAL INSTITUTION:

\_\_\_\_\_  
(Name) (Number/Street/City/State/Zip)

TYPE OF REPORT:

\_\_\_\_\_: 21 days prior to the election. Covering the period from the initial filing  
(Date) to 5 days prior to this filing.

10-31-01: 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

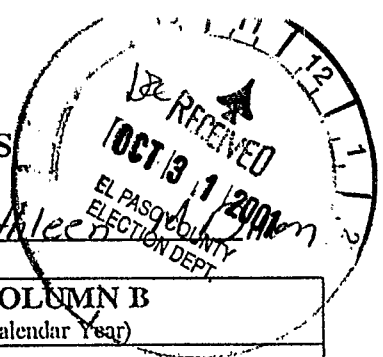
SUMMARY:	COLUMN A (This Period)	COLUMN B (Year to Date)
1. Funds on Hand Beginning of Reporting Period:	\$	XXXXXXXXXXXXXXXXXX
2. Total Contributions (From Ln 13):	\$ 121.15	\$ 121.15
3. Total Expenditures (From Ln 21):	\$ 121.15	\$ 121.15
4. Funds on Hand at Close of Reporting Period:	\$ 0	XXXXXXXXXXXXXXXXXX
5. Debts/Obligations Owed by the Committee:	\$ 0	XXXXXXXXXXXXXXXXXX
6. Pledges Owed to the Committee:	\$ 0	XXXXXXXXXXXXXXXXXX

CONTINUE TO PAGE 2

**DETAILED SUMMARY PAGE  
OF CONTRIBUTIONS AND EXPENDITURES**

Page 2

NAME OF COMMITTEE: Committee to elect Kathleen



<b>CONTRIBUTIONS:</b> (Please provide spreadsheet format for detail items.)	<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"):	\$ 21.15	\$ 21.15
7. Non-Itemized (Total all Contributions Under \$20):	\$	\$
8. Political Party Committees:	\$	\$
9. Other Political Committees:	\$ 100.00	\$ 100.00
10. All Loans Received (Schedule C):	\$	\$
11. Other receipts (Dividends, Interest, Refunds, Rebates, Etc.):	\$	\$
12. <b>TOTAL CONTRIBUTIONS:</b> (Add all of the above items)	\$ 121.15	\$ 121.15
<b>EXPENDITURES:</b>		
13. Itemized Expenditures (\$20 and up) (Use Spreadsheet for Details "Schedule B"):	\$ 121.15	\$ 121.15
14. Total of Non-Itemized Expenditures:	\$	\$
15. Loan Repayments (Use "Schedule C"):	\$	\$
16. Refunds to Contributions:	XXXXXXXXXX	XXXXXXXXXX
17. Individuals/Persons other than Political Committees:	\$	\$
18. Political Party Committees:	\$	\$
19. Other Political Committees:	\$	\$
20. <b>TOTAL EXPENDITURES:</b> (Add all of the above items)	\$ 121.15	\$ 121.15

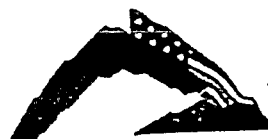
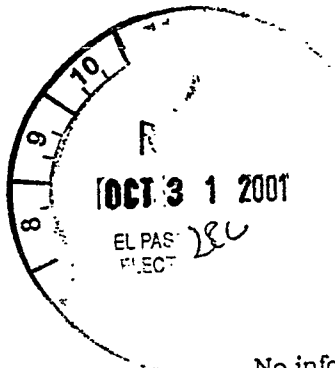
**OFFSETS TO OPERATING EXPENDITURES**(An offset to expenditures means a payment made by a third person to a third party for the benefit of any committee or party. Such goods and services are used directly or indirectly by the committee or party for its purposes. Use a similar spreadsheet for reporting 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.

Kathleen M Dillon                      Kathleen M Dillon                      10-31-01  
Type/Print Name of Agent                      Signature of Agent                      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**  
**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  $\alpha$  appropriate box(es):  Primary  General  Other (Specify):

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.) OCCUPATION/EMPLOYER:

KATHLEEN OILZOM DATE OF CONTRI: 101301

ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP) AMT OF THIS CONTRIBUTION:

15935 RHOODES PL LIBERT CO 80106 \$ 21.15

AGGREGATE YEAR TO DATE CONTRIBUTIONS:

\$ 21.15

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.) OCCUPATION/EMPLOYER:

EDUCATION POLITICAL COMM DATE OF CONTRI: 101701

ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP) AMT OF THIS CONTRIBUTION:

2520 W TEJOM SUITE 200 COLO SPRINGS CO 80907 \$ 100.00

AGGREGATE YEAR TO DATE CONTRIBUTIONS:

\$ 121.15

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.) OCCUPATION/EMPLOYER:

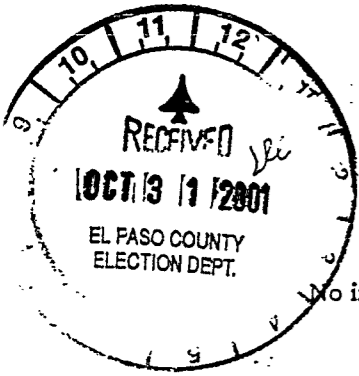
DATE OF CONTRI:

ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP) 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.)

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  $\alpha$  appropriate boxes:  Primary  General  Other (Specify):

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
THE SIGM CENTER	3032 S ACADEMY BLVD COSPRING 80916	\$ 106.00
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
SIGMS		101601

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
COPY MAX	7645 N ACADEMY BLVD CS CO 80920	\$ 15.15
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
FIYERS		101301

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

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