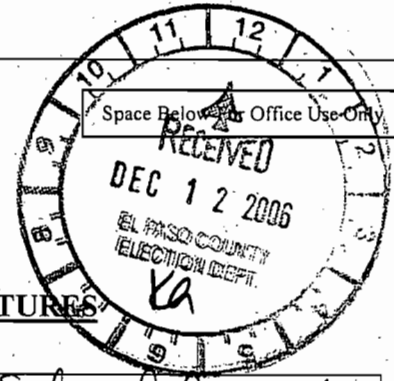


Colorado Secretary of State
Elections Division
1700 Broadway, Ste. 270
Denver, CO 80290
Ph: (303) 894-2200 x 3
Fax: (303) 869-4861
www.sos.state.co.us



REPORT OF CONTRIBUTIONS AND EXPENDITURES
(C.R.S. 1-45-108)

Full Name of Committee/Person: <small>As Shown On Registration</small>	Linda Pugh for D2 School Board
Address of Committee/Person:	3040 Westcliff Dr W
City, State & Zip Code:	Colorado Springs, CO 80906
Committee Type:	Candidate
Name and Address of Financial Institution	The Bank at Broadmoor 155 Lake Ave Colorado Springs CO 80906

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: Through
Date 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)	\$ 2622.74
2	Total Monetary Contributions (line 11)	\$ 2504.96
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 5127.70
4	Total Monetary Expenditures (line 19)	\$ 4903.05
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 224.65

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): *I hereby certify and declare, under penalty of perjury, that to the best of my knowledge or belief all contributions received during this reporting period, including any contributions received in the form of membership dues transferred by a membership organization, are from permissible sources.*

Print Registered Agent's Name: ~~Linda M. Pugh~~ Linda M. Pugh
 Registered Agent's Signature: Linda M. Pugh Date: 12 Dec 06
 Print Candidate Name: _____
 Candidates Signature: _____ Date: _____

Amendment

DETAILED SUMMARY

Full Name of Committee/Person: Linda Pugh for D2 School Board

Current Reporting Period: October 24, 2005 Through November 26, 2005

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	2622.74
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	2484.96
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	20.00
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)	\$	2504.96
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	61.85
13	Total Contributions (Line 11 + line 12)	\$	2566.81
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	4669.63
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	17.52
16	Loan Repayments Made (Please list on Schedule "C")	\$	
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$	215.90
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$	
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$	4903 ⁰⁵
20	Total Spending (Line 18 + line 19)	\$	4903.05

Amendment

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

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

Full Name of Committee/Person:

Linda Pugh for D2 School Board

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>Oct 28, 2005</u>	4. Name: <u>GSI Voter Calls</u>
2. <u>Amount</u> \$ <u>1182⁰³</u>	5. Address: <u>1570 Prospect Avenue</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Hermosa Beach, CA 90254</u>
7. Purpose of Expenditure: <u>Voter calls</u>	
<input checked="" 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: _____
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	