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JUN 01 2004  
COUNTY  
ION DEPT

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

Full Name of Committee/Person:	COMMITTEE TO ELECT PATRICK (PAT) FELTS <small>As Shown On Registration</small>
Address of Committee/Person:	6205 BURGESS RD
City, State & Zip Code:	COLO SPRGS CO 80908
Committee Type:	
Name and Address of Financial Institution:	N/A

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)

Reporting Period Covered: APRIL 26, 2004 Through JUNE 3, 2004  
date date

Declared Total Spending (if applicable) [Art. XXVIII, Sec. 4(1)] \$ 147.26

	Totals Detailed Summary Page
1 Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ -0-
2 Total Monetary Contributions (line 11)	\$ -0-
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ -0-
4 Total Monetary Expenditures (line 19)	\$ 147.26
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ -0-

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: Lori M. Felts

Registered Agent's (Treasurer's) Signature: Lori M. Felts Date: \_\_\_\_\_

Print Candidate Name: PATRICK E. FELTS

Candidates Signature: Patrick E. Felts Date: MAY 29, 04

**DETAILED SUMMARY**

Full Name of Committee/Person: COMMITTEE TO ELECT PATRICK (PAT) FELTS

Current Reporting Period: APRIL 26, 2004 Through JUNE 3, 2004

	<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>	\$	
6	<b>Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "A")	\$	- 0 -
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$	- 0 -
8	<b>Loans Received</b> (Please list on Schedule "C")	\$	- 0 -
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$	- 0 -
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$	- 0 -
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$	- 0 -
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$	- 0 -
13	<b>Total Contributions</b> (Line 11 + line 12)	\$	- 0 -
14	<b>Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "B")	\$	147.26
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$	- 0 -
16	<b>Loan Repayments Made</b> (Please list on Schedule "C")	\$	- 0 -
17	<b>Returned Contributions (To donor)</b> (Please list on Schedule "D")	\$	- 0 -
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$	- 0 -
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$	147.26
20	<b>Total Spending</b> (Line 18 + line 19)	\$	147.26

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

Full Name of Committee/Person: COMMITTEE TO ELECT Patrick (PAT) Felts

**PLEASE PRINT/TYPE**

1. <u>Date Expended</u>	4. Name: <u>SIGN MANAGEMENT SVC</u>
2. <u>Amount</u> \$ <u>70.00</u>	5. Address: <u>4303 NORTHERIDGE PL.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>COLO SPRGS CO</u>
	7. Purpose of Expenditure: <u>ROAD SIGNS</u>

1. <u>Date Expended</u>	4. Name: <u>BLACK FOREST NEWS</u>
2. <u>Amount</u> \$ <u>70.66</u>	5. Address: <u>11425 BLACK FOREST NEWS</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>BLACK FOREST CO 80908</u>
	7. Purpose of Expenditure: <u>AD</u>

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: _____

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: _____

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: _____