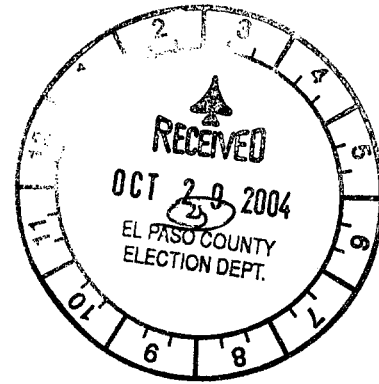


Glenn Lodwig  
481 Hwy. 105 #B117  
Monument, CO 80132  
Tel. 719-481-1581  
Fax 719-488-2777



# Fax Cover

**To:** Co. Sec Of State Elections Division      **From:** Glenn Lodwig

---

**Fax:** 303-869-4861 / 719-520-7327      **Pages:** 6 (including cover)

---

**Phone:** 303-894-2200 xt3      **Date:** October 29, 2004

---

**Time:**

---

**Re:**      **CC:**

---

Urgent     For Review     Please Comment     Please Reply     Please Recycle

---

• **Comments:**

Report of Contributions and Expenses for S.H.A.C.

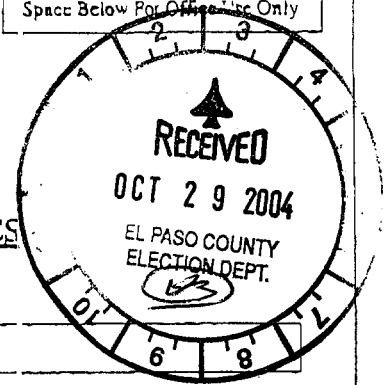
Please call if all pages aren't received in good order.

Thank You.

Colorado Secretary of State  
Elections Division  
1560 Broadway, Ste. 200  
Denver, CO 80202  
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 EXPENDITURES**  
(C.R.S. 1-45-108)

Full Name of Committee/Person:	S.H.A.C. <small>As Shown On Registration</small>
Address of Committee/Person:	481 Hwy 105 #B117
City, State & Zip Code:	MONUMENT CO 80132
Committee Type:	ISSUE COMMITTEE
Name and Address of Financial Institution:	

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:  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)	\$ <del>0</del>
2 Total Monetary Contributions (line 11)	\$ 1585.00
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 1585.00
4 Total Monetary Expenditures (line 19)	\$ 4644.39
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 1585.00

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)]

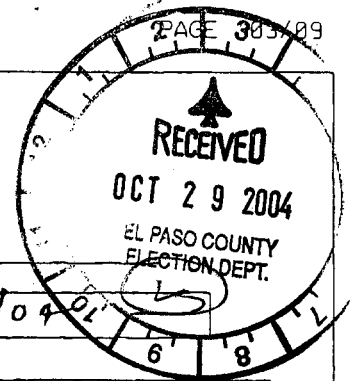
Authorization (Must be completed by either the Registered Agent OR the Candidate)

Print Registered Agent's (Treasurer's) Name: GLENN LODWIG

Registered Agent's (Treasurer's) Signature: [Signature] Date: 10/29/04

Print Candidate Name: N/A

Candidates Signature: \_\_\_\_\_ Date: \_\_\_\_\_



DETAILED SUMMARY

S.H.A.C.

Full Name of Committee/Person: GLENN LODWIG

Current Reporting Period: 10/15/04

Through 10/29/04

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	<del>0</del>
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	1585,00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	<del>0</del>
8	Loans Received (Please list on Schedule "C")	\$	<del>0</del>
9	Total of Other Receipts (Interest, Dividends, etc.)	\$	<del>0</del>
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$	<del>0</del>
11	Total Monetary Contributions (Total of lines 6 through 10)	\$	1585,00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	<del>0</del>
13	Total Contributions (Line 11 + line 12)	\$	1585,00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(w)] (Please list on Schedule "B")	\$	4624,79
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	19,60
16	Loan Repayments Made (Please list on Schedule "C")	\$	<del>0</del>
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$	<del>0</del>
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$	<del>0</del>
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$	4644,39
20	Total Spending (Line 18 + line 19)	\$	4644,39

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

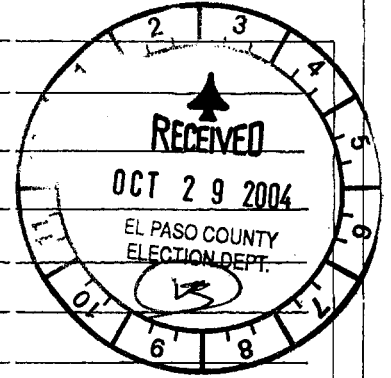
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: S.H.A.C. GIBBY LODWIG

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. Date Accepted 10/15/04	4. Name (Last, First): MODDY, KEVIN
2. Contribution Amt. \$ 120.00	5. Address 17070 REMINGTON RD.
3. Aggregate Amt. * \$	6. City/State/Zip: CO. SPRINGS, CO 80908
	7. Description: CHECK
	8. Employer (if applicable, mandatory): N/A
	9. Occupation (if applicable, mandatory): N/A



1. Date Accepted 10/15/04	4. Name (Last, First): LAWRENCE, LARRY
2. Contribution Amt. \$ 25.00	5. Address: 18881 PAGENTRY PL.
3. Aggregate Amt. * \$	6. City/State/Zip: MONUMENT, CO 80132
	7. Description: CHECK
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. Date Accepted 10/15/04	4. Name (Last, First): HURFORD, THOMAS
2. Contribution Amt. \$ 30.00	5. Address: 19035 PURSER CT.
3. Aggregate Amt. * \$	6. City/State/Zip: MONUMENT, CO 80132
	7. Description: CHECK
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. Date Accepted 10/15/04	4. Name (Last, First): OTOOLE, SHAWN
2. Contribution Amt. \$ 50.00	5. Address: 565 ORE CART WAY
3. Aggregate Amt. * \$	6. City/State/Zip: MONUMENT, CO 80132
	7. Description: CHECK
	8. Employer (if applicable, mandatory):
	9. Occupation (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. XXVII 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).

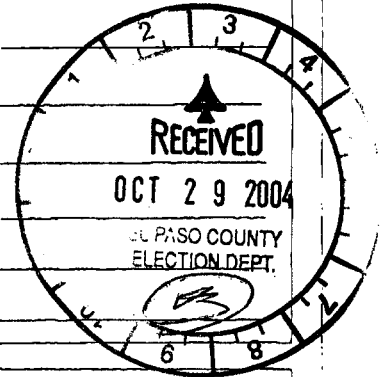
**Schedule A - Itemized Contributions Statement (\$20 or more)**  
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: S.H.A.C. GRANN LODWIG

**WARNING: Please read the instruction page for Schedule "A" before completing!**

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/15/04	4. Name (Last, First): <u>ROBINS, RONALD</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>18525 ST. ANDREWS DR.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>MONUMENT CO 80132</u>
	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u> ):
	9. Occupation (if applicable, <u>mandatory</u> ):



1. <u>Date Accepted</u> 10/15/04	4. Name (Last, First): <u>HERNANDEZ, GUSTAVO</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>8880 ASPEN HILLS CT.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80908</u>
	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u> ):
	9. Occupation (if applicable, <u>mandatory</u> ):

1. <u>Date Accepted</u> 10/15/04	4. Name (Last, First): <u>POLICH, ELEANOR</u>
2. <u>Contribution Amt.</u> \$ 20.00	5. Address: <u>6555 ELMO RIDGE HEIGHTS</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>CO. SPRINGS CO 80908</u>
	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u> ):
	9. Occupation (if applicable, <u>mandatory</u> ):

1. <u>Date Accepted</u> 10/15/04	4. Name (Last, First): <u>MCCORMACK, D.J.</u>
2. <u>Contribution Amt.</u> \$ 1000.00	5. Address: <u>862 LONG TIMBER LN.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>MONUMENT CO 80132</u>
	7. Description: <u>CHECK</u>
	8. Employer (if applicable, <u>mandatory</u> ):
	9. Occupation (if applicable, <u>mandatory</u> ):

\* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional sites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVII, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14)

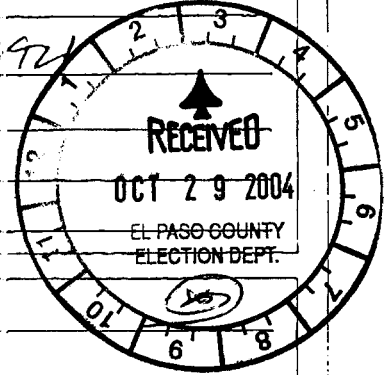
Schedule A - Itemized Contributions Statement (\$20 or more)  
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: S.H.A.C. GLENN LODWIG

**WARNING: Please read the instruction page for Schedule "A" before completing!**

PLEASE PRINT/TYPE

1. Date Accepted <u>10/15/04</u>	4. Name (Last, First): <u>KRUGER, KENDALL</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>15907 LONGMEADOW LN.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>COLORADO SPRINGS CO 80921</u>
	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____



1. Date Accepted <u>10/15/04</u>	4. Name (Last, First): <u>Mc KINLEY, MICHAEL</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>19161 SHADOWOOD DR.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted	4. Name (Last, First): _____
2. Contribution Amt. \$	5. Address: _____
3. Aggregate Amt. * \$	6. City/State/Zip: _____
	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted	4. Name (Last, First): _____
2. Contribution Amt. \$	5. Address: _____
3. Aggregate Amt. * \$	6. City/State/Zip: _____
	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

\* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional articles: 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).

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

Full Name of Committee/Person: S. H. A. C. GLENN LODWIG



PLEASE PRINT/TYPE

1. Date Expended <u>10/22/04</u>	4. Name: <u>PHILIP LANE</u>
2. Amount \$ <u>119.00</u>	5. Address: <u>5728 TUCKERMAN LN.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>CO. SPRINGS, CO 80918</u>
	7. Purpose of Expenditure: <u>ART WORK</u>

1. Date Expended <u>10/21/04</u>	4. Name: <u>COPY MAX</u>
2. Amount \$ <u>894.08</u>	5. Address: <u>7645 N. ACADEMY BLVD.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>CO. SPRINGS, CO 80920</u>
	7. Purpose of Expenditure: <u>PRINTING</u>

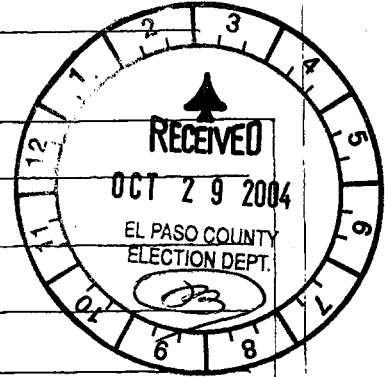
1. Date Expended <u>10/15/04</u>	4. Name: <u>OFFICE DEPOT</u>
2. Amount \$ <u>43.71</u>	5. Address: <u>1750 E. WOODMEN RD.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>CO. SPRINGS, CO 80920</u>
	7. Purpose of Expenditure: <u>ENVELOPES</u>

1. Date Expended <u>10/24/04</u>	4. Name: <u>TRI LAKES TRIBUNE</u>
2. Amount \$ <u>1381.45</u>	5. Address: <u>P.O. BOX 408</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>MONUMENT, CO 80132</u>
	7. Purpose of Expenditure: <u>ADVERTISING</u>

1. Date Expended <u>10/15/04</u>	4. Name: <u>EXPRESS SIGNS, INC.</u>
2. Amount \$ <u>782.76</u>	5. Address: <u>4541 AUSTIN BLUFFS PKWY</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80918</u>
	7. Purpose of Expenditure: <u>ROAD SIGNS</u>

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

Full Name of Committee/Person: S.H.A.C. - GEORGE LODWIG



PLEASE PRINT/TYPE

1. <u>Date Expended</u> 10/27/04	4. Name: <u>U.S. POSTAL SERVICE</u>
2. <u>Amount</u> \$ <u>1997.50</u>	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>MONUMENT, CO 80132.</u>
	7. Purpose of Expenditure: <u>POSTAGE</u>

1. <u>Date Expended</u> 10/15/04	4. Name: <u>OFFICE MAX</u>
2. <u>Amount</u> \$ <u>19.60</u>	5. Address: <u>7645 N. ACADEMY BLVD.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>CO. SPRINGS, CO 80930</u>
	7. Purpose of Expenditure: <u>COPIES</u>

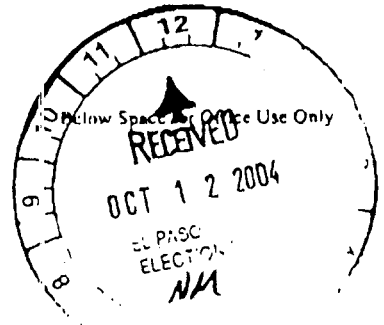
1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____

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: _____



Colorado Secretary of State  
 Elections Division  
 1560 Broadway, Ste 200  
 Denver, CO 80202  
 Ph: (303) 894-2200 x.3  
 Fax: (303) 869-4861  
 www.sos.state.co.us



**COMMITTEE REGISTRATION FORM**  
 (CRS 1-45-108)

**Committee Name:** S. H. A. C.

**Purpose/Office Sought:** COMMUNITY ORGANIZATION REGARDING SCHOOL DISTRICT ISSUES

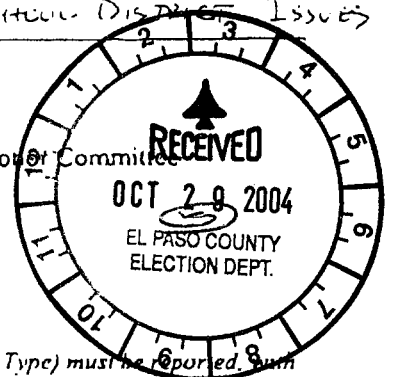
**Check Only One Committee Type:**

Candidate Committee       Political Party       Small District Committee

Political Committee       Issue Committee

Is this an amendment\*?      YES       NO

\* Description of what is being amended. Pursuant to Rule 23.1 any changes (including Filing Type) must be reported, with the appropriate officer, within five (5) days by filing an amended committee registration form.



**Contact Information:**

Name of Person Acting As Registered Agent (Treasurer): COLGWIN LUDWIG

Address (Physical): 481 Hwy 105 # B117 Monument CO 80132

Address (Mailing): " " " "

Telephone No.: 719-481-1581      E-Mail: shal@hornegabiguschool.com

**Affiliation (if applicable):** \_\_\_\_\_

**Check Only One Filing Type:**

Manual Filer  
 Electronic Filer

**Check Only One Jurisdiction:**

Federal       State       County  
 Municipal       Multi-County  
 Other: \_\_\_\_\_

**Authorization:**

Registered Agent's (Treasurer's) Signature: [Signature]      Date: 10/12/04

Print Candidate Name: N/A

Candidate Address (include mailing): N/A

Candidate Signature: N/A      Date: \_\_\_\_\_

[Handwritten mark]