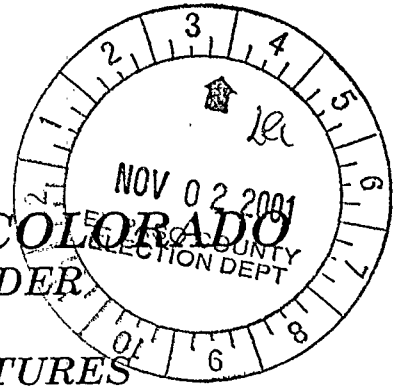




EL PASO COUNTY, COLORADO
OFFICE OF THE CLERK & RECORDER



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):

Teachers' Committee for Excellence in Education

ADDRESS OF COMMITTEE:

2520 North Tejon, Suite 100, Colorado Springs, CO 80907

(Number/Street/City/State/Zip)

NAME AND ADDRESS OF FINANCIAL INSTITUTION:

Bank One, Colorado NA, P.O. Box 215002, Denver, CO 80221-9002

(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.

10/29/01 : 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.

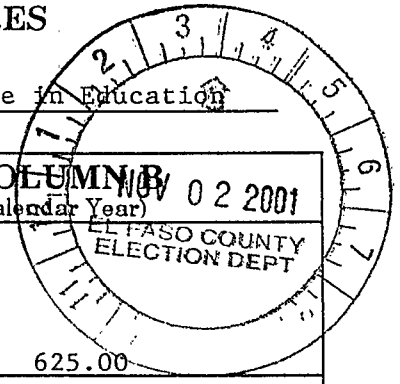
: Termination Report -OR- Is this report an amendment? Yes No

SUMMARY:	COLUMN A (This Period)	COLUMN B (Year to Date)
1. Funds on Hand Beginning of Reporting Period:	\$ 2,687.46	XXXXXXXXXXXXXXXX
2. Total Contributions (From Ln 13):	\$ 1,725.00	\$ 7,270.42
3. Total Expenditures (From Ln 21):	\$ 3,373.23	\$ 7,897.11
4. Funds on Hand at Close of Reporting Period:	\$ 1,039.23	XXXXXXXXXXXXXXXX
5. Debts/Obligations Owed by the Committee:	\$	XXXXXXXXXXXXXXXX
6. Pledges Owed to the Committee:	\$	XXXXXXXXXXXXXXXX

**DETAILED SUMMARY PAGE
OF CONTRIBUTIONS AND EXPENDITURES**

Page 2

NAME OF COMMITTEE: Teachers' Committee for Excellence in Education



CONTRIBUTIONS: (Please provide spreadsheet format for detail items. ¹)	COLUMN A (Total This Report)	COLUMN B (Calendar Year)
Contributions (other than loans) from: Individuals/Persons (Not Political Committees) Total Itemized (Use spreadsheet for Details "Schedule A"):		
7. Details "Schedule A"):	\$ 625.00	\$ 625.00
8. Non-Itemized (Total all Contributions Under \$20):	\$	\$
9. Political Party Committees:	\$	\$
10. Other Political Committees:	\$ 1,100.00	\$ 3,300.00
11. All Loans Received (Schedule C):	\$	\$
12. Other receipts (Dividends, Interest, Refunds, Rebates, Etc.):	\$	\$
13. TOTAL CONTRIBUTIONS: (Add all of the above items)	\$ 1,725.00	\$ 7,270.42
EXPENDITURES:		
14. Itemized Expenditures (\$20 and up) (Use Spreadsheet for Details "Schedule B"):	\$ 3,373.23	\$ 5,873.11
15. Total of Non-Itemized Expenditures:	\$	\$
16. Loan Repayments (Use "Schedule C"):	\$	\$
17. Refunds to Contributions:	XXXXXXXXXX	XXXXXXXXXX
18. Individuals/Persons other than Political Committees:	\$	\$
19. Political Party Committees:	\$	\$
20. Other Political Committees:	\$	\$
21. TOTAL EXPENDITURES: (Add all of the above items)	\$ 3,373.23	\$ 7,897.11

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.

	COLUMN A (Total This Report)	COLUMN 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.

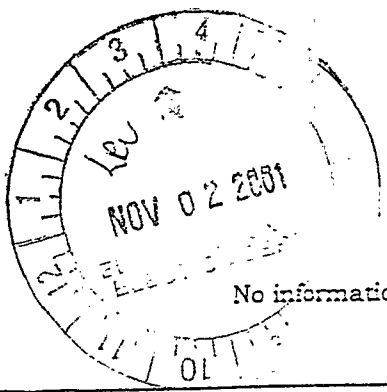
Carol Buchholz
Type/Print Name of Agent

Carol A. Buchholz 11-1-01
Signature of Agent Date

¹ The following is required for spreadsheet formats: Full name/address/zip; Date; Amount this Reporting Period; and Total Aggregate Year to Date per Contributor. 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 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).

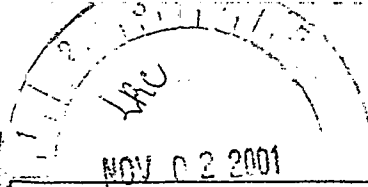
Check appropriate boxes: Primary General Other (Specify):

PAYMENT TO: (PRINT NAME)	ADDRESS: (NUMBER STREET/CITY STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
NEWELL LEDBETTER ADVERTISING CO	2720 YAMPA ST CO SPGS	\$ 1000.00
PURPOSE OF EXPENDITURE:		DATE OF EXPEND
RADIO ADVERTISEMENTS		101901

PAYMENT TO: (PRINT NAME)	ADDRESS: (NUMBER STREET/CITY STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
NEWELL LEDBETTER ADVERTISING CO	2720 YAMPA ST CO SPGS	\$ 180.00
PURPOSE OF EXPENDITURE:		DATE OF EXPEND
RADIO ADVERTISEMENTS		102601

PAYMENT TO: (PRINT NAME)	ADDRESS: (NUMBER STREET/CITY STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
NEWELL LEDBETTER ADVERTISING CO	2720 YAMPA ST CO SPGS	\$ 600.00
PURPOSE OF EXPENDITURE:		DATE OF EXPEND
RADIO ADVERTISEMENTS		102901

PAYMENT TO: (PRINT NAME)	ADDRESS: (NUMBER STREET/CITY STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
NEWELL LEDBETTER ADVERTISING CO	2720 YAMPA ST CO SPGS	\$ 200.00
PURPOSE OF EXPENDITURE:		DATE OF EXPEND
RADIO ADVERTISEMENTS		102901



SCHEDULE B: EXPENDITURES CONTINUATION PAGE

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
C O S P G S C O U N T R Y C L U B	3 3 3 3 T E M P L E T O N G A P C O S P G S C O 8 0 9 0 7	\$ 3 9 3 . 2 3
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
C A N D I D A T E R E C E P T I O N		1 0 1 8 0 1

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
A L L M A I L P R E P	2 3 0 4 E B I J O U C O S P G S C O	\$ 1 0 0 0 . 0 0
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
M A I L I N G B R O C H U R E S		1 0 1 2 0 1

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

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

NOV 02 2001

SCHEDULE A: CONTRIBUTIONS CONTINUATION PAGE

PAGE 2 OF 2

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)

OCCUPATION/EMPLOYER:

JEFERSON COUNTY EDUCATION ASSOC POLITICAL ACTION COMMITTEE

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

1050 WADSWORTH BLVD LAKEWOOD CO 80215 102901

DATE OF CONTRI:

AMT OF THIS CONTRIBUTION:

AGGREGATE YEAR TO DATE CONTRIBUTIONS:

\$500.00

\$500.00

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)

OCCUPATION/EMPLOYER:

MICHAEL COUGHLIN PRESIDENT CSEA

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

5415 CRYSTAL LOMA PT COLORADO SPRINGS CO 80915 102901

DATE OF CONTRI:

AMT OF THIS CONTRIBUTION:

AGGREGATE YEAR TO DATE CONTRIBUTIONS:

\$200.00

\$200.00

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)

OCCUPATION/EMPLOYER:

[Empty name and occupation fields]

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

[Empty address fields]

DATE OF CONTRI:

AMT OF THIS CONTRIBUTION:

AGGREGATE YEAR TO DATE CONTRIBUTIONS:

\$ [Empty]

\$ [Empty]

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)

OCCUPATION/EMPLOYER:

[Empty name and occupation fields]

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

[Empty address fields]

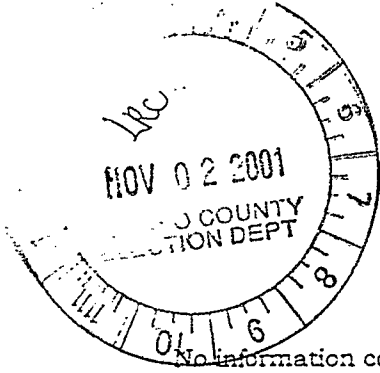
DATE OF CONTRI:

AMT OF THIS CONTRIBUTION:

AGGREGATE YEAR TO DATE CONTRIBUTIONS:

\$ [Empty]

\$ [Empty]



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)

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Check appropriate box(es): Primary General Other (Specify):

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

SANDRA COX-GIRON TEACHER DISTRICT 11

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

1270 SANDPIPER DR COLORADO SPRINGS CO 80916 102501 \$ 75.00

AGGREGATE YEAR TO DATE CONTRIBUTIONS:

\$ 75.00

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

JAMES & EMILY BOEHLKE

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

5050 CHAMPAQNE DR COLORADO SPRINGS CO 80919 102501 \$ 350.00

AGGREGATE YEAR TO DATE CONTRIBUTIONS:

\$ 350.00

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

COLORADO FUND FOR CHILDREN & PUBLIC EDUCATION

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

1500 GRANT ST DENVER CO 80203 102901 \$ 600.00

AGGREGATE YEAR TO DATE CONTRIBUTIONS:

\$ 2600.00