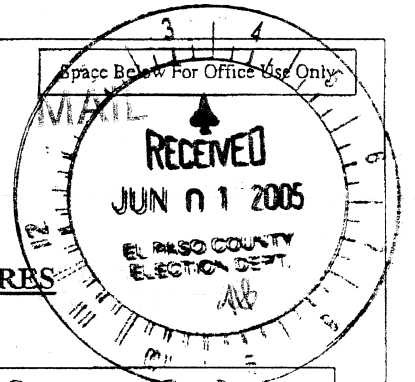


Colorado Secretary of State
 Elections Division
 1560 Broadway, Ste. 200
 Denver, CO 80202
 Ph: (303) 894-2200 x 3
 Fax: (303) 869-4861
 www.sos.state.co.us



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

Full Name of Committee/Person:	El Paso Citizens for Public Safety <small>As Shown On Registration</small>
Address of Committee/Person:	6445 Borough Dr.
City, State & Zip Code:	Colo Spgs CO 80922
Committee Type:	
Name and Address of Financial Institution:	Digital Federal Credit Union

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)	\$ 375.48
2	Total Monetary Contributions (line 11)	\$ 0
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 375.48
4	Total Monetary Expenditures (line 19)	\$ 375.48
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)

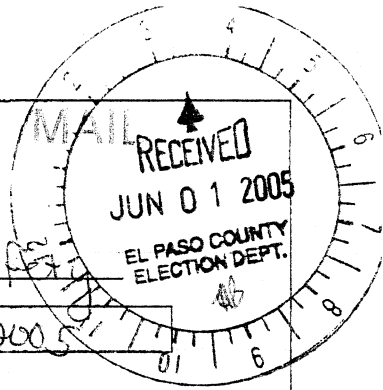
Print Registered Agent's (Treasurer's) Name: Katherine J Oakey

Registered Agent's (Treasurer's) Signature: Katherine J Oakey Date: 5/25/2005

Print Candidate Name: _____

Candidates Signature: _____ Date: _____

DETAILED SUMMARY

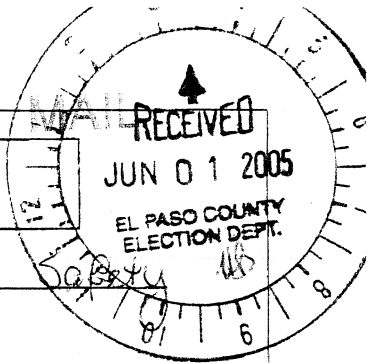


Full Name of Committee/Person: El Paso Citizens for Public Safety

Current Reporting Period: Dec 5, 2003 Through May 25, 2005

	Funds on hand at the beginning of reporting period (Monetary Only)	\$ 375.48
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ -
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ -
8	Loans Received (Please list on Schedule "C")	\$ -
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ -
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ -
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ -
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ -
13	Total Contributions (Line 11 + line 12)	\$ -
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 375.48
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ -
16	Loan Repayments Made (Please list on Schedule "C")	\$ -
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ -
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ -
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 375.48
20	Total Spending (Line 18 + line 19)	\$ 375.48

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



Full Name of Committee/Person: El Paso Citizens for Public Safety

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 5/24/2005	4. Name: <u>B.D. Cadman</u>
2. <u>Amount</u> \$ 375.48	5. Address: <u>P.O. Box 76588</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs CO 80970</u>
	7. Purpose of Expenditure: <u>literature production</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: _____

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: _____