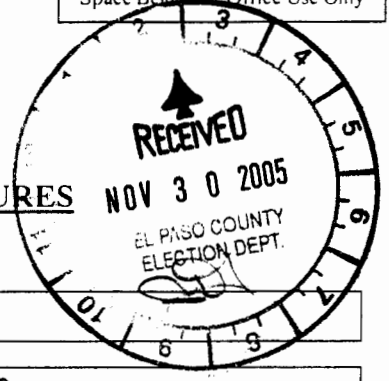


Colorado Secretary of State
 Elections Division
 1700 Broadway, Ste. 270
 Denver, CO 80290
 Ph: (303) 894-2200 x 3
 Fax: (303) 869-4861
 www.sos.state.co.us



Space Below For Office Use Only



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

Full Name of Committee/Person:	Classrooms For Kids <small>As Shown On Registration</small>
Address of Committee/Person:	210 Sarah Brittain Lane
City, State & Zip Code:	1779 Courtyard Heights CSC 80906
Committee Type:	Issue
Name and Address of Financial Institution:	First Bank 2 W. Cascade Ave CSC 80903

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)	\$ 12,209.61
2	Total Monetary Contributions (line 11)	\$ 15,000.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 27,209.61
4	Total Monetary Expenditures (line 19)	\$ 27,209.61
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: Donald Magill
 Registered Agent's (Treasurer's) Signature: [Signature] Date: 11-29-05
 Print Candidate Name: _____
 Candidates Signature: _____ Date: _____

DETAILED SUMMARY

Full Name of Committee/Person:

Classrooms for Kids

Current Reporting Period:

October 24, 2005

Through

November 30, 2005

	Funds on hand at the beginning of reporting period (Monetary Only)	\$ 12209.61
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 15,000.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ - 0 -
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)	\$ 15,000.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ - 0 -
13	Total Contributions (Line 11 + line 12)	\$ 15,000.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 27,209.61
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ - 0 -
16	Loan Repayments Made (Please list on Schedule "C")	\$ - 0 -
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ - 0 -
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ - 0 -
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 27,209.61
20	Total Spending (Line 18 + line 19)	\$ 27,209.61

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

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

Full Name of Committee/Person: Classrooms for Kids

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10-24-05	4. Name (Last, First): <u>WL Homes LLC</u>
2. <u>Contribution Amt.</u> \$ 5000.00	5. Address: <u>Explorer Drive Suite 300</u>
3. <u>Aggregate Amt. *</u> \$ 5000.00	6. City/State/Zip: <u>Colorado Springs CO 80921</u>
	7. Description: <u>Donation</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>Builder</u>

1. <u>Date Accepted</u> 10-26-05	4. Name (Last, First): <u>Engle Homes</u>
2. <u>Contribution Amt.</u> \$ 5,000.00	5. Address: <u>8 S. Teton</u>
3. <u>Aggregate Amt. *</u> \$ 5,000.00	6. City/State/Zip: <u>Colorado Springs CO 80903</u>
	7. Description: <u>Donation</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>Builder</u>

1. <u>Date Accepted</u> 11-9-05	4. Name (Last, First): <u>Beezer Homes</u>
2. <u>Contribution Amt.</u> \$ 3,000.00	5. Address: <u>1825 Flintshire Street</u>
3. <u>Aggregate Amt. *</u> \$ 3000.00	6. City/State/Zip: <u>Colorado Springs CO 80901</u>
	7. Description: <u>Donation</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>Builder</u>

1. <u>Date Accepted</u> 11-9-05	4. Name (Last, First): <u>Case International Company</u>
2. <u>Contribution Amt.</u> \$ 2,000.00	5. Address: <u>102 E Pikes Peak Avenue</u>
3. <u>Aggregate Amt. *</u> \$ 2,000.00	6. City/State/Zip: <u>Colorado Springs CO 80903</u>
	7. Description: <u>Donor</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>Developer</u>

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: 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: Classrooms for Kids

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 10-25-05	4. Name: <u>Sarah B Jack & Assoc</u>
2. <u>Amount</u> \$ 7050.00	5. Address: <u>1779 Courtyard Heights</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs CO 80906</u>
	7. Purpose of Expenditure: <u>Postage - Handling - Fees</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10-28-05	4. Name: <u>Sarah B Jack & Assoc</u>
2. <u>Amount</u> \$ 5,006.00	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>Opinion Research - Polling</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11-10-05	4. Name: <u>Sarah B Jack & Assoc</u>
2. <u>Amount</u> \$ 11962.40	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>Signage, Design, Printing</u> <u>Postage Handling</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11-29-05	4. Name: <u>Rusty Green - Nobility Homes</u>
2. <u>Amount</u> \$ 1875.00	5. Address: <u>7643 McLaughlin Road</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Falcon CO 80831</u>
	7. Purpose of Expenditure: <u>Polling - Opinion Research</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11-29-05	4. Name: <u>Falcon Community Builders for Classrooms</u>
2. <u>Amount</u> \$ 1322.21	5. Address: <u>520 E Colorado Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs CO 80903</u>
	7. Purpose of Expenditure: <u>Donation</u> <input type="checkbox"/> Check box if Electioneering Communication