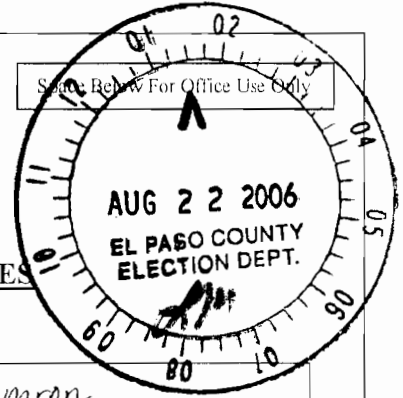


Colorado Secretary of State  
 Elections Division  
 1700 Broadway, Ste. 270  
 Denver, CO 80290  
 Ph (303) 894-2200 x 3  
 Fax (303) 869-4861  
 www.sos.state.co.us



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

<b>Full Name of Committee/Person:</b>	Committee to Elect Sandra Damron <small>As Shown On Registration</small>
<b>Address of Committee/Person:</b>	P.O. Box 359
<b>City, State &amp; Zip Code:</b>	Colorado Springs, CO 80901
<b>Committee Type:</b>	Candidate
<b>Name and Address of Financial Institution</b>	

**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:**  date **Through**  date

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

		Totals Detailed Summary Page
1	<b>Funds on Hand at the Beginning of Reporting Period</b> (monetary only)	\$ 0
2	<b>Total Monetary Contributions</b> (line 11)	\$ 0
3	<b>Total of Monetary Contributions &amp; Beginning Amount</b> (line 1 + line 2)	\$ 0
4	<b>Total Monetary Expenditures</b> (line 19)	\$ 0
5	<b>Funds on Hand at the End of Reporting Period</b> (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: \_\_\_\_\_  
 Registered Agent's (Treasurer's) Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Print Candidate Name: Sandra J. Damron  
 Candidates Signature: Sandra J. Damron Date: 8/2/06