

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



MAIL

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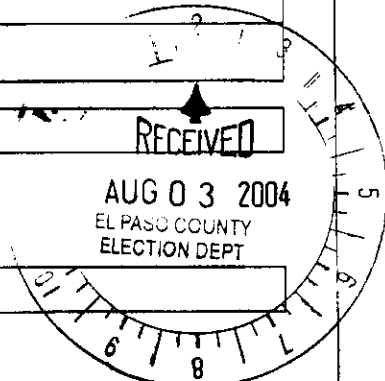
POSTMARK
DATE: 8/2/04

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

Full Name of Committee/Person:	William G. (Bill) BREMER <small>As Shown On Registration</small>
Address of Committee/Person:	3690 PENNYROYAL LANE
City, State & Zip Code:	COLORADO SPRINGS, CO 80906
Committee Type:	CANDIDATE
Name and Address of Financial Institution:	CASH

SOS ID NUMBER (state committees ONLY):

RECEIVED



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)	\$ - 0 -
2 Total Monetary Contributions (line 11)	\$ 245 -
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 245 -
4 Total Monetary Expenditures (line 19)	\$ 245 -
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: William G. (Bill) BREMER
Registered Agent's (Treasurer's) Signature: *[Signature]* Date: 8/2/04
Print Candidate Name: WILLIAM (BILL) BREMER
Candidates Signature: *[Signature]* Date: 8/2/04

DETAILED SUMMARY

Full Name of Committee/Person: William G. (Bill) Bremer

Current Reporting Period: JAN 8, 2004 Through MAY 1, 2004

	Funds on hand at the beginning of reporting period (Monetary Only)	\$ - 0 -
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 210 -
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 35 -
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)	\$ 245 -
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$
13	Total Contributions (Line 11 + line 12)	\$ 245 -
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 245 -
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)	\$ 245 -
20	Total Spending (Line 18 + line 19)	\$ 245 -

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

Full Name of Committee/Person: William G. (Bill) Bremer

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>1/8/04</u>	4. Name: <u>EL PASO COUNTY REPUBLICANS</u>
2. <u>Amount</u> \$ <u>25⁰⁰</u>	5. Address: <u>710 S TEJON ST</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>CENTRAL COMMITTEE TABLE</u>

1. <u>Date Expended</u> <u>2/7/04</u>	4. Name: <u>ANDERSON AND ASSOCIATES</u>
2. <u>Amount</u> \$ <u>45⁰⁰</u>	5. Address: <u>2864 SOUTH CIRCLE DR</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>COPIES</u>

1. <u>Date Expended</u> <u>4/18/04</u>	4. Name: <u>ANDERSON AND ASSOCIATES</u>
2. <u>Amount</u> \$ <u>45⁰⁰</u>	5. Address: <u>2864 SOUTH CIRCLE DRIVE</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>COPIES</u>

1. <u>Date Expended</u> <u>4/20/04</u>	4. Name: <u>USPO</u>
2. <u>Amount</u> \$ <u>80⁰⁰</u>	5. Address: _____
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</u>

1. <u>Date Expended</u> <u>4/23/04</u>	4. Name: <u>EL PASO COUNTY REPUBLICANS</u>
2. <u>Amount</u> \$ <u>50⁰⁰</u>	5. Address: <u>710 SOUTH TEJON</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>CENTRAL COMMITTEE ASSEMBLY TABLE</u>

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

Full Name of Committee/Person: William G. (Bill) Brewer

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

PLEASE PRINT/TYPE

1. Date Accepted <u>April 18/04</u>	4. Name (Last, First): <u>CHARLOTTE JORDAN, CHARLOTTE</u>
2. Contribution Amt. \$ <u>50⁻</u>	5. Address: <u>P O BOX 1624</u>
3. Aggregate Amt. * \$ <u>50⁻</u>	6. City/State/Zip: <u>PRIMA LAKES, CO 80933</u>
	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>4/18/04</u>	4. Name (Last, First): BOB <u>TAYLOR, BOB</u>
2. Contribution Amt. \$ <u>60⁻</u>	5. Address: <u>971 TENDR FOOT HILL ROAD</u>
3. Aggregate Amt. * \$ <u>110⁻</u>	6. City/State/Zip: <u>CONCORD SPRINGS, CO 80906</u>
	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>4/18/04</u>	4. Name (Last, First): <u>FRASER, TERRY & LINDA</u>
2. Contribution Amt. \$ <u>100⁻</u>	5. Address: <u>6631 CAMEL COURT</u>
3. Aggregate Amt. * \$ <u>210⁻</u>	6. City/State/Zip: <u>CONCORD SPRINGS, CO 80915</u>
	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): _____

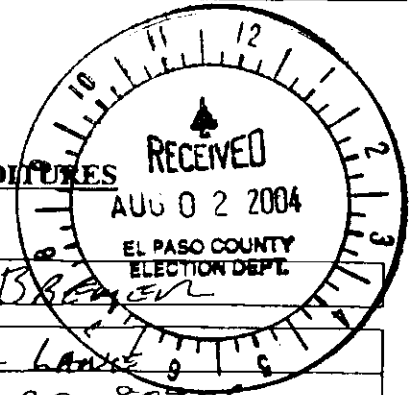
* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII,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

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FAX

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

Full Name of Committee/Person:	William G. (Bill) Brauner <small>As Shown On Registration</small>
Address of Committee/Person:	3690 PENNYROYAL LAKE
City, State & Zip Code:	COLORADO SPRINGS, CO 80906
Committee Type:	CANDIDATE
Name and Address of Financial Institution:	CASH

SOS ID NUMBER (state committees ONLY):

Type of Report

- Regularly Scheduled Filing.
- Amended Filing. This amends previous report filed on (date)
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- 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)	\$ -0-
2 Total Monetary Contributions (line 11)	\$ 245-
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 245-
4 Total Monetary Expenditures (line 19)	\$ 245-
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: William G. (Bill) Brauner
 Registered Agent's (Treasurer's) Signature: [Signature] Date: 8/2/07
 Print Candidate Name: William (Bill) Brauner
 Candidates Signature: [Signature] Date: 8/2/07

DETAILED SUMMARY

FAX

Full Name of Committee/Person: William G. (Bill) Bremer

Current Reporting Period: Jan 8, 2004 Through MAY 1, 2004

	Funds on hand at the beginning of reporting period (Monetary Only)	\$ - 0 -
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 210 -
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 35 -
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)	\$ 245 -
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$
13	Total Contributions (Line 11 + line 12)	\$ 245 -
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 245 -
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 -
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20	Total Spending (Line 18 + line 19)	\$ 245 -

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

Full Name of Committee/Person: William G. (Bill) Bremer FAX

PLEASE PRINT/TYPE

1. Date Expended <u>1/8/04</u>	4. Name: <u>EL PASO COUNTY REPUBLICANS</u>
2. Amount \$ <u>25⁰⁰</u>	5. Address: <u>710 S TEJON ST</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>CENTRAL COMMITTEE TABLE</u>

1. Date Expended <u>2/7/04</u>	4. Name: <u>ANDERSON AND ASSOCIATES</u>
2. Amount \$ <u>45⁰⁰</u>	5. Address: <u>2864 SOUTH CIRCLE DR</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>COPIES</u>

1. Date Expended <u>4/18/04</u>	4. Name: <u>ANDERSON AND ASSOCIATES</u>
2. Amount \$ <u>45⁰⁰</u>	5. Address: <u>2864 SOUTH CIRCLE DRIVE</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>COPIES</u>

1. Date Expended <u>4/20/04</u>	4. Name: <u>USPO</u>
2. Amount \$ <u>80⁰⁰</u>	5. Address: _____
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</u>

1. Date Expended <u>4/23/04</u>	4. Name: <u>EL PASO COUNTY REPUBLICANS</u>
2. Amount \$ <u>50⁰⁰</u>	5. Address: <u>710 SOUTH TEJON</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>CENTRAL COMMITTEE ASSEMBLY TABLE</u>

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

Full Name of Committee/Person: William G. (Bill) Brennan - AX

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

PLEASE PRINT/TYPE

1. Date Accepted <u>April 18/04</u>	4. Name (Last, First): <u>CHARLOTTE (Jordan) CHARLOTTE</u>
2. Contribution Amt. \$ <u>50⁻</u>	5. Address: <u>P O BOX 1624</u>
3. Aggregate Amt. * \$ <u>50⁻</u>	6. City/State/Zip: <u>PURMAN LAKE, CO 80933</u>
	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>4/18/04</u>	4. Name (Last, First): FR <u>TAYLOR, BOB</u>
2. Contribution Amt. \$ <u>60⁻</u>	5. Address: <u>971 TENDERFOOT HILL ROAD</u>
3. Aggregate Amt. * \$ <u>110⁻</u>	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80906</u>
	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>4/18/04</u>	4. Name (Last, First): <u>FRASER, TERRY & LINDA</u>
2. Contribution Amt. \$ <u>100⁻</u>	5. Address: <u>6631 CAMEL COURT</u>
3. Aggregate Amt. * \$ <u>210⁻</u>	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80915</u>
	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 rules: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec. 3(5); Small Door Committee Art. XXVIII, Sec. 2(14).