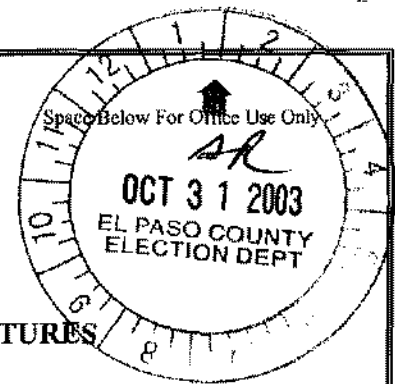


Elections Division  
 Department of State  
 1560 Broadway, Ste. 200  
 Denver, CO 80202  
 Ph: (303) 894-2200 (3)  
 Fax: (303) 869-4861  
 www.sos.state.co.us



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

Full Name of Committee/Person:	The Campaign to Change Lives - El Paso County <small>As Shown On Registration</small>
Address of Committee/Person:	5540 Tech Center Dr, Suite 202
City, State & Zip Code :	Colorado Springs, CO 80919
Committee Type :	Issue Committee
Name and Address of Financial Institution	Peoples Nat'l Bank, 5125 N. Academy, Colo. Springs 80919

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: Oct. 10, 2003 Through Oct. 26, 2003  
date date

Declared Total Spending (if applicable) \$ \_\_\_\_\_  
 [Art. XXVIII, Sect. 4 (1)]

	Totals Detailed Summary Page
1 Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 73,173.10
2 Total Monetary Contributions (line 11)	\$ 61,675.00
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 134,848.10
4 Total Monetary Expenditures (line 18)	\$ 122,053.88
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 12,794.02

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.  
 [Art. XXVIII Sect. 10 (2) (a)]

**Authorization** (Must be completed by either the Registered Agent OR the Candidate)

Print Registered Agent's (Treasurer's) Name: Robert S. Gardner

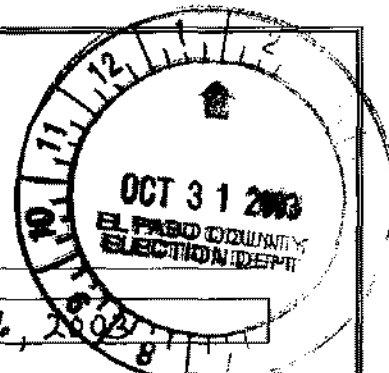
Registered Agent's (Treasurer's) Signature: \_\_\_\_\_ Date: 10/31/03

Candidates Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DETAILED SUMMARY**

Full Name of Committee/Person: The Campaign to Change Lives

Current Reporting Period: Oct. 10, 2003 Through Oct. 26, 2003



	<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>	\$	73,160.10
7	<b>Itemized Contributions \$20 or More [CRS 1-45-108 (1) (a)]</b> (Please list on Schedule "A")	\$	1,675.00
8	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$	.00
9	<b>Loans Received</b> (Please list on Schedule "C")	\$	60,000.00
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$	.00
11	<b>Total Monetary Contributions</b>	\$	61,675.00
12	<b>Total Non-Monetary Contributions</b>	\$	.00
13	<b>Total Contributions</b>	\$	61,675.00
14	<b>Itemized Expenditures \$20 or More [CRS 1-45-108 (1) (a)]</b> (Please list on Schedule "B")	\$	122,053.88
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$	.00
16	<b>Loan Repayments Made</b> (Please list on Schedule "C")	\$	.00
17	<b>Returned Contributions (To donor)</b> (Please list on Schedule "D")	\$	.00
18	<b>Total Monetary Expenditures</b>	\$	122,053.88
19	<b>Total Spending</b> (line 12 + line 18)	\$	122,053.88

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

[CRS 1-45-108 (1) (a)]

**Full Name of Committee/Person:** \_\_\_\_\_

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

**PLEASE PRINT/TYPE**

1. <u>Date Accepted</u> 10/10/03	4. Name (Last, First): <u>McNally, Michael J.</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>3150 Sheila's Pl.</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$ 100.00	6. City/State/Zip: <u>CIS, CO 80904</u>
	7. Occupation (if applicable, <u>mandatory</u> ): <u>M.D.</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>self</u>

1. <u>Date Accepted</u> 10/14/03	4. Name (Last, First): <u>Cartwright, Sue</u>
2. <u>Contribution Amt.</u> \$ 10.00	5. Address: <u>362 Mission Hill</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$ 10.00	6. City/State/Zip: <u>CIS, CO 80921</u>
	7. Occupation (if applicable, <u>mandatory</u> ): _____
	8. Employer (if applicable, <u>mandatory</u> ): _____

1. <u>Date Accepted</u> 10/10/03	4. Name (Last, First): <u>Peake, Robert L.</u>
2. <u>Contribution Amt.</u> \$ 10.00	5. Address: <u>P.O. Box 1219</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$ 10.00	6. City/State/Zip: <u>CIS, CO 80901</u>
	7. Occupation (if applicable, <u>mandatory</u> ): _____
	8. Employer (if applicable, <u>mandatory</u> ): _____

1. <u>Date Accepted</u> 10/10/03	4. Name (Last, First): <u>Carlson, Kenneth</u>
2. <u>Contribution Amt.</u> \$ 10.00	5. Address: <u>73 Seagull Cir.</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$ 10.00	6. City/State/Zip: <u>CIS, CO 80921</u>
	7. Occupation (if applicable, <u>mandatory</u> ): _____
	8. Employer (if applicable, <u>mandatory</u> ): _____

1. <u>Date Accepted</u> 10/14/03	4. Name (Last, First): <u>Evans, James H.</u>
2. <u>Contribution Amt.</u> \$ 1000.00	5. Address: <u>4760 Flintridge Dr., Ste 250</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$ 1000.00	6. City/State/Zip: <u>CIS, CO 80918</u>
	7. Occupation (if applicable, <u>mandatory</u> ): <u>Ph.D.</u>
	8. Employer (if applicable, <u>mandatory</u> ): <u>Self.</u>

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

[CRS 1-45-108 (1) (a)]

Full Name of Committee/Person: \_\_\_\_\_

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/15/03	4. Name (Last, First): <u>Wagner, Derek</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>4511 Misty Dr.</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$ 50.00	6. City/State/Zip: <u>C/S, CO 80918</u>
	7. Occupation (if applicable, <u>mandatory</u> ): _____
	8. Employer (if applicable, <u>mandatory</u> ): _____

1. <u>Date Accepted</u> 10/15/03	4. Name (Last, First): <u>Wegner, Mariana</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>4511 Misty Dr.</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$ 50.00	6. City/State/Zip: <u>C/S, CO 80918</u>
	7. Occupation (if applicable, <u>mandatory</u> ): _____
	8. Employer (if applicable, <u>mandatory</u> ): _____

1. <u>Date Accepted</u> 10/10/03	4. Name (Last, First): <u>O'Shea, Barry M.</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>3032 Promontory Peak Dr.</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$ 100.00	6. City/State/Zip: <u>C/S, CO 80920</u>
	7. Occupation (if applicable, <u>mandatory</u> ): _____
	8. Employer (if applicable, <u>mandatory</u> ): _____

1. <u>Date Accepted</u> 10/13/03	4. Name (Last, First): <u>Engram, Tamara J.</u>
2. <u>Contribution Amt.</u> \$ 25.00	5. Address: <u>4526 Castle Point Dr.</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$ 25.00	6. City/State/Zip: <u>C/S, CO 80917</u>
	7. Occupation (if applicable, <u>mandatory</u> ): _____
	8. Employer (if applicable, <u>mandatory</u> ): _____

1. <u>Date Accepted</u> 10/10/03	4. Name (Last, First): <u>Worten, Marvin</u>
2. <u>Contribution Amt.</u> \$ 10.00	5. Address: <u>15595 Falcon Ridge Ct.</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$ 10.00	6. City/State/Zip: <u>C/S, CO 80921</u>
	7. Occupation (if applicable, <u>mandatory</u> ): _____
	8. Employer (if applicable, <u>mandatory</u> ): _____

**Schedule B – Itemized Expenditures Statement (\$20 or more)**

[CRS 1-45-108-(1) (a)]

Full Name of Committee/Person: Campaign to Change Lives - El Paso County

PLEASE PRINT/TYPE

1. Date Expended <u>10/10/03</u>	4. Name: <u>Response Technologies, Inc.</u>
2. Amount <u>\$ 15,481.34</u>	5. Address: <u>4900 Colorado Blvd.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver, CO 80216</u>
	7. Purpose of Expenditure: <u>Postage, Handling, + Mail Services, Printing</u>

1. Date Expended <u>10/10/03</u>	4. Name: <u>Response Technologies, Inc.</u>
2. Amount <u>\$ 1,500.00</u>	5. Address: <u>4900 Colorado Blvd.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver, CO 80216</u>
	7. Purpose of Expenditure: <u>Absentee Ballot Postage</u>

1. Date Expended <u>10/10/03</u>	4. Name: <u>Robert S. Gardner</u>
2. Amount <u>\$ 1019.75</u>	5. Address: <u>5540 Tech Center Dr.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs, CO 80919</u>
	7. Purpose of Expenditure: <u>Reimbursement for Clerk + Recorder Escrow + Miscellaneous expenses</u>

1. Date Expended <u>10/10/03</u>	4. Name: <u>Sarah B. Jack + Assoc.</u>
2. Amount <u>\$ 7,652.06</u>	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>Yard signs, programmed phone calls, campaign expenses</u>

1. Date Expended <u>10/10/03</u>	4. Name: <u>Blakely + Company</u>
2. Amount <u>\$ 36,490.00</u>	5. Address: <u>111 So. Tejon, Suite 521</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>Media Placement + Buy</u>

**Schedule B – Itemized Expenditures Statement (\$20 or more)**

[CRS 1-45-108-(1) (a)]

Full Name of Committee/Person: Campaign to Change Lives - El Paso County

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 10/14/03	4. Name: <u>Housing + Building Ass'n.</u>
2. <u>Amount</u> \$ 195.00	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Colorado Springs, CO 80918</u>
	7. Purpose of Expenditure: <u>Purchase of Table at Business Connections Event</u>

1. <u>Date Expended</u> 10/22/03	4. Name: <u>Blakely + Company</u>
2. <u>Amount</u> \$ 49,410.67	5. Address: <u>111 So Tejon, Suite 521</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>Media Placement + Buy</u>

1. <u>Date Expended</u> 10/24/03	4. Name: <u>Response Technologies, Inc.</u>
2. <u>Amount</u> \$ 10,305.06	5. Address: <u>4900 Colorado Blvd.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver, CO 80216</u>
	7. Purpose of Expenditure: <u>Mail handling, printing, + postage</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: _____

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

[CRS 1-45-108 (1) (a)]

**Full Name of Committee/Person:** \_\_\_\_\_

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

**PLEASE PRINT/TYPE**

1. <u>Date Accepted</u> 10/13/03	4. Name (Last, First): <u>Wischhusen, Ann L.</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>917 E. Williamette</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$ 100.00	6. City/State/Zip: <u>CLS, CO 80909</u>
	7. Occupation (if applicable, <u>mandatory</u> ): _____
	8. Employer (if applicable, <u>mandatory</u> ): _____

1. <u>Date Accepted</u> 10/15/03	4. Name (Last, First): <u>Sibo, Michael P.</u>
2. <u>Contribution Amt.</u> \$ 200.00	5. Address: <u>9936 English Ivy Ct.</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$ 200.00	6. City/State/Zip: <u>CLS, CO 80920</u>
	7. Occupation (if applicable, <u>mandatory</u> ): _____
	8. Employer (if applicable, <u>mandatory</u> ): _____

1. <u>Date Accepted</u> 10/25/03	4. Name (Last, First): <u>Mitchell, Patty</u>
2. <u>Contribution Amt.</u> \$ 20.00	5. Address: <u>114 Arrawanna St.</u>
3. <u>Aggregate Amt.</u> (*Election Cycle) \$ 20.00	6. City/State/Zip: <u>CLS, CO</u>
	7. Occupation (if applicable, <u>mandatory</u> ): _____
	8. Employer (if applicable, <u>mandatory</u> ): _____

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</u> \$	5. Address: _____
3. <u>Aggregate Amt.</u> (*Election Cycle) \$	6. City/State/Zip: _____
	7. Occupation (if applicable, <u>mandatory</u> ): _____
	8. Employer (if applicable, <u>mandatory</u> ): _____

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</u> \$	5. Address: _____
3. <u>Aggregate Amt.</u> (*Election Cycle) \$	6. City/State/Zip: _____
	7. Occupation (if applicable, <u>mandatory</u> ): _____
	8. Employer (if applicable, <u>mandatory</u> ): _____

**Schedule C - Loans**

Full Name of Committee/Person: Campaign to Change Lives - El Paso County

**LOANS - Loans Owed by the Committee**

(Use a separate schedule for each loan. This form is for line item 9 and 16 of the Detailed Summary Report.)  
 [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)) Notwithstanding any other section of this article to the contrary, a state candidate's candidate committee may receive a loan from a financial institution organized under state or federal law if the loan bears the usual and customary interest rate, is made on a basis that assures repayment, is evidenced by a written instrument, and is subject to a due date or amortization schedule CRS 1-45-105.3(7).]

**LOAN SOURCE**

Name (Last, First or Institution): The Resource Exchange

Address: 418 So. Weber

City/State/Zip: Colo. Springs, CO 80903

Original Amount of Loan: \$ 60,000 Interest Rate: 0%

Loan Amount Received This Reporting Period: \$ 60,000.00 Total of All Loans This Reporting Period: \$ 60,000  
 (Place on line 9 of Detailed Summary Report)

Principal Amount Paid This Reporting Period: \$ - 0 -

Interest Amount Paid This Reporting Period: \$ - 0 -

Amount Repaid This Reporting Period: \$ - 0 - Total Repayments Made: \$ .00  
 (Amount Repaid is sum of Principal & Interest entered on Detail Summary) (Sum of Schedule C pages, Place on line 16 of Detailed Summary)

Outstanding Balance: \$ 60,000.00

TERMS OF LOAN: 10/22/03 11/4/04  
 Date Loan Received Due Date for Final Payment

**LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN**

Full Name	Address, City, St., Zip	Amount Guaranteed