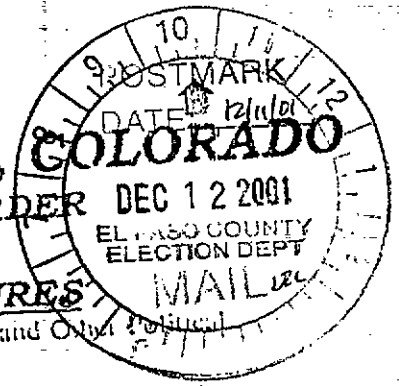




**EL PASO COUNTY, COLORADO**  
**OFFICE OF THE CLERK & RECORDER**



**REPORT OF CONTRIBUTIONS AND EXPENDITURES**

For Candidate Committees, Political Party Committees, Issue Committees and Other Political Committees. FILE IN DUPLICATE.

NAME OF COMMITTEE (In Full):  
Committee to Re-elect Carol Chapman

ADDRESS OF COMMITTEE:  
17705 Max Rd. Peyton, CO 80831  
 (Number/Street/City/State/Zip)

NAME AND ADDRESS OF FINANCIAL INSTITUTION:  
Farmers State Bank 7025 Meridian Rd Falcon 80831  
 (Name) (Number/Street/City/State/Zip)

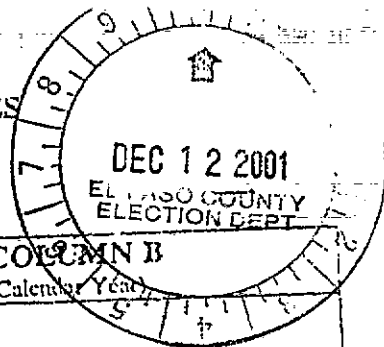
TYPE OF REPORT:  
10/16/01 : 21 days prior to the election. Covering the period from the initial filing to 5 days prior to this filing.  
11/2/01 : Friday before the election. Covering the period from 5 days prior to the previous filing to 5 days prior to this filing.  
12/5/01 : 30 days after the election. Covering the period from 5 days prior to the previous filing to 5 days prior to this filing.  
 \_\_\_\_\_ : November 1 of off-year. Covering the period from 5 days prior to the previous filing to November 1.

: Termination Report Is this report an amendment?  Yes  No

SUMMARY:	COLUMN A (This Period)	COLUMN B (Year to Date)
1. Funds on Hand Beginning of Reporting Period:	\$ 0	XXXXXXXXXXXXXXXXXX
2. Total Contributions (From Ln 13):	\$ 25750	\$
3. Total Expenditures (From Ln 21):	\$ 242290	\$
4. Funds on Hand at Close of Reporting Period:	\$ 15260	XXXXXXXXXXXXXXXXXX
5. Debts/Obligations Owed by the Committee:	\$ 0	XXXXXXXXXXXXXXXXXX
6. Pledges Owed to the Committee:	\$ 0	XXXXXXXXXXXXXXXXXX

**DETAILED SUMMARY PAGE  
OF CONTRIBUTIONS AND EXPENDITURES**

Page 2



NAME OF COMMITTEE: \_\_\_\_\_

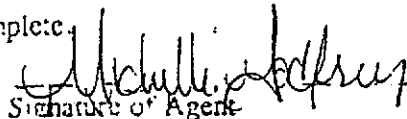
CONTRIBUTIONS: (Please provide spreadsheet format for detail items.)	COLUMN A (Total This Report)	COLUMN B (Calendar Year)
Contributions (other than loans) from Individuals/Persons (Not Political Committees) Total Itemized (Use spreadsheet for Details "Schedule A"):	\$ 2575 <sup>00</sup>	\$
7. Non-Itemized (Total all Contributions Under \$20):	\$	\$
8. Political Party Committees:	\$	\$
9. Other Political Committees:	\$	\$
10. All Loans Received (Schedule C)	\$	\$
11. Other receipts (Dividends, Interest Refunds, Rebates, Etc.):	\$	\$
12. <b>TOTAL CONTRIBUTIONS:</b> (Add all of the above items)	\$ 2575 <sup>00</sup>	\$
<b>EXPENDITURES:</b>		
14. Itemized Expenditures (\$20 and up) (Use Spreadsheet for Details "Schedule B")	\$ 2422 <sup>40</sup>	\$
15. Total of Non-Itemized Expenditures:	\$	\$
16. Loan Repayments (Use "Schedule C")	\$	\$
17. Refunds to Contributors:	XXXXXXXXXX	XXXXXXXXXX
18. Individuals/Persons other than Political Committees:	\$	\$
19. Political Party Committees:	\$	\$
20. Other Political Committees:	\$	\$
21. <b>TOTAL EXPENDITURES:</b> (Add all of the above items)	\$ 2422 <sup>40</sup>	\$

**OFFSETS TO OPERATING EXPENDITURES** (An offset to expenditures means a payment made by a third person to a third party for the benefit of any committee or party. Such goods and services are used directly or indirectly by the committee or party for its purposes. Use separate spreadsheet for reporting these offsets. LISTING ONLY. DO NOT ADD TO CONTRIBUTIONS OR EXPENDITURES.)

	COLUMN A (Total This Report)	COLUMN B (Calendar Year)
Total Itemized Offsets (\$20 and over):	\$	\$
Total Non-Itemized Offsets:	\$	\$

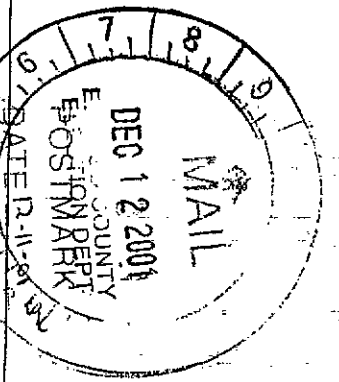
I certify that I have examined this Report of Contributions and Expenditures and to the best of my knowledge and belief it is true, correct and complete.

Type/Print Name of Agent

 12/5/01  
 Signature of Agent Date

Michelle Godfrey

<sup>1</sup> The following is required for spreadsheet formats: Full name/address/zip; Name of Employer & Occupation; Date; Amount this Reporting Period; and Total Aggregate Year to Date. For expenditures, include the purpose of the expenditure. See attached examples of Schedules A and B.



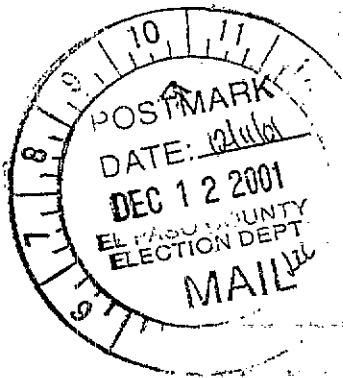
SCHEDULE A: CONTRIBUTIONS CONTINUATION PAGE PAGE 1 OF 1

CONTRIBUTOR'S NAME (PRINT LAST NAME, FIRST NAME, MI) \_\_\_\_\_ OCCUPATION/EMPLOYER: \_\_\_\_\_  
ADDRESS: (NUMBER, STREET, CITY, STATE, ZIP) \_\_\_\_\_ DATE OF CONTR: \_\_\_\_\_ AMT OF THIS CONTRIBUTION: \_\_\_\_\_  
AGGREGATE YEAR TO DATE CONTRIBUTIONS: \$ \_\_\_\_\_

CONTRIBUTOR'S NAME (PRINT LAST NAME, FIRST NAME, MI) \_\_\_\_\_ OCCUPATION/EMPLOYER: \_\_\_\_\_  
ADDRESS: (NUMBER, STREET, CITY, STATE, ZIP) \_\_\_\_\_ DATE OF CONTR: \_\_\_\_\_ AMT OF THIS CONTRIBUTION: \_\_\_\_\_  
AGGREGATE YEAR TO DATE CONTRIBUTIONS: \$ \_\_\_\_\_

CONTRIBUTOR'S NAME (PRINT LAST NAME, FIRST NAME, MI) \_\_\_\_\_ OCCUPATION/EMPLOYER: \_\_\_\_\_  
ADDRESS: (NUMBER, STREET, CITY, STATE, ZIP) \_\_\_\_\_ DATE OF CONTR: \_\_\_\_\_ AMT OF THIS CONTRIBUTION: \_\_\_\_\_  
AGGREGATE YEAR TO DATE CONTRIBUTIONS: \$ \_\_\_\_\_

CONTRIBUTOR'S NAME (PRINT LAST NAME, FIRST NAME, MI) \_\_\_\_\_ OCCUPATION/EMPLOYER: \_\_\_\_\_  
ADDRESS: (NUMBER, STREET, CITY, STATE, ZIP) \_\_\_\_\_ DATE OF CONTR: \_\_\_\_\_ AMT OF THIS CONTRIBUTION: \_\_\_\_\_  
AGGREGATE YEAR TO DATE CONTRIBUTIONS: \$ \_\_\_\_\_



SCHEDULE B: EXPENDITURES CONTINUATION PAGE

PAYMENT TO: (PRINT NAME)  
 ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED)  
 PURPOSE OF EXPENDITURE:  
 AMOUNT OF EXPENDITURE:  
 DATE OF EXPENDITURE:

PAYMENT TO: (PRINT NAME)  
 ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED)  
 PURPOSE OF EXPENDITURE:  
 AMOUNT OF EXPENDITURE:  
 DATE OF EXPENDITURE:

PAYMENT TO: (PRINT NAME)  
 ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED)  
 PURPOSE OF EXPENDITURE:  
 AMOUNT OF EXPENDITURE:  
 DATE OF EXPENDITURE:

PAYMENT TO: (PRINT NAME)  
 ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED)  
 PURPOSE OF EXPENDITURE:  
 AMOUNT OF EXPENDITURE:  
 DATE OF EXPENDITURE:

PAYMENT TO: (PRINT NAME)  
 ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED)  
 PURPOSE OF EXPENDITURE:  
 AMOUNT OF EXPENDITURE:  
 DATE OF EXPENDITURE:



**EL PASO COUNTY, COLORADO**  
**OFFICE OF THE CLERK & RECORDER**

**REPORT OF CONTRIBUTIONS AND EXPENDITURES**

For Candidate Committees, Political Party Committees, Issue Committees and Other Political Committees. FILE IN DUPLICATE.

NAME OF COMMITTEE (In Full)

Committee to Re-elect Carol Chapman

ADDRESS OF COMMITTEE:

17705 Max Rd. Peyton, CO 80831  
 (Number/Street/City/State/Zip)

NAME AND ADDRESS OF FINANCIAL INSTITUTION:

Farmers State Bank 7025 Meridian Rd. Falcon 80831  
 (Name) (Number/Street/City/State/Zip)

TYPE OF REPORT:

10/16/01 : 21 days prior to the election. Covering the period from the initial filing to 5 days prior to this filing.

11/2/01 : Friday before the election. Covering the period from 5 days prior to the previous filing to 5 days prior to this filing.

12/5/01 : 30 days after the election. Covering the period from 5 days prior to the previous filing to 5 days prior to this filing.

\_\_\_\_\_ : November 1 of off-year. Covering the period from 5 days prior to the previous filing to November 1.

: Termination Report

Is this report an amendment?  Yes  No

SUMMARY:	COLUMN A (This Period)	COLUMN B (Year to Date)
1. Funds on Hand Beginning of Reporting Period:	\$ <u>0</u>	XXXXXXXXXXXXXXXX
2. Total Contributions (From Ln 13):	\$ <u>25750</u>	\$
3. Total Expenditures (From Ln 21):	\$ <u>242200</u>	\$
4. Funds on Hand at Close of Reporting Period:	\$ <u>15260</u>	XXXXXXXXXXXXXXXX
5. Debts/Obligations Owed by the Committee:	\$ <u>0</u>	XXXXXXXXXXXXXXXX
6. Pledges Owed to the Committee:	\$ <u>0</u>	XXXXXXXXXXXXXXXX

CONTINUE TO PAGE 2

**DETAILED SUMMARY PAGE  
OF CONTRIBUTIONS AND EXPENDITURES**

Page 2

NAME OF COMMITTEE: \_\_\_\_\_

CONTRIBUTIONS: (Please provide spreadsheet format for detail items.)	COLUMN A (Total This Report)	COLUMN B (Calendar Year)
Contributions (other than loans) from Individuals/Persons (Not Political Committees)		
7. Total Itemized (Use spreadsheet for Details "Schedule A"):	\$ 2575 <sup>00</sup>	\$
8. Non-Itemized (Total all Contributions Under \$20):	\$	\$
9. Political Party Committees:	\$	\$
10. Other Political Committees:	\$	\$
11. All Loans Received (Schedule C)	\$	\$
12. Other receipts (Dividends, Interest Refunds, Rebates, Etc.):	\$	\$
13. TOTAL CONTRIBUTIONS: (Add all of the above items)	\$ 2575 <sup>00</sup>	\$
<b>EXPENDITURES:</b>		
14. Itemized Expenditures (\$20 and up) (Use Spreadsheet for Details "Schedule B")	\$ 2422 <sup>40</sup>	\$
15. Total of Non-Itemized Expenditures:	\$	\$
16. Loan Repayments (Use "Schedule C")	\$	\$
17. Refunds to Contributors:	XXXXXXXXXX	XXXXXXXXXX
18. Individuals/Persons other than Political Committee:	\$	\$
19. Political Party Committees:	\$	\$
20. Other Political Committees:	\$	\$
21. TOTAL EXPENDITURES: (Add all of the above items)	\$ 2422 <sup>40</sup>	\$

**OFFSETS TO OPERATING EXPENDITURES**(An offset to expenditures means a payment made by a third person to a third party for the benefit of any committee or party. Such goods and services are used directly or indirectly by the committee or party for its purposes. Use a similar spreadsheet for reporting these offsets. LISTING ONLY. DO NOT ADD TO CONTRIBUTIONS OR EXPENDITURES.)

	COLUMN A (Total This Report)	COLUMN B (Calendar Year)
Total Itemized Offsets (\$20 and over):	\$	\$
Total Non-Itemized Offsets:	\$	\$

I certify that I have examined this Report of Contributions and Expenditures and to the best of my knowledge and belief it is true, correct and complete.

Type/Print Name of Agent

Signature of Agent

Date

*Michelle Gofrey*

*Michelle Gofrey* 12/5/01

The following is required for spreadsheet formats: Full name/address/zip; Name of Employer & Occupation; Date; Amount this Reporting Period; and Total Aggregate Year to Date. For expenditures, include the purpose of the expenditure. See attached examples of Schedules A and B.

SCHEDULE A: CONTRIBUTIONS CONTINUATION PAGE PAGE 11 OF 11

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, MI) \_\_\_\_\_ OCCUPATION/EMPLOYER: \_\_\_\_\_

ADDRESS: (NUMBER, STREET, CITY, STATE, ZIP) \_\_\_\_\_ DATE OF CONTR: \_\_\_\_\_ AMT OF THIS CONTRIBUTION: \$ \_\_\_\_\_

AGGREGATE YEAR TO DATE CONTRIBUTIONS: \$ \_\_\_\_\_

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, MI) \_\_\_\_\_ OCCUPATION/EMPLOYER: \_\_\_\_\_

ADDRESS: (NUMBER, STREET, CITY, STATE, ZIP) \_\_\_\_\_ DATE OF CONTR: \_\_\_\_\_ AMT OF THIS CONTRIBUTION: \$ \_\_\_\_\_

AGGREGATE YEAR TO DATE CONTRIBUTIONS: \$ \_\_\_\_\_

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, MI) \_\_\_\_\_ OCCUPATION/EMPLOYER: \_\_\_\_\_

ADDRESS: (NUMBER, STREET, CITY, STATE, ZIP) \_\_\_\_\_ DATE OF CONTR: \_\_\_\_\_ AMT OF THIS CONTRIBUTION: \$ \_\_\_\_\_

AGGREGATE YEAR TO DATE CONTRIBUTIONS: \$ \_\_\_\_\_

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, MI) \_\_\_\_\_ OCCUPATION/EMPLOYER: \_\_\_\_\_

ADDRESS: (NUMBER, STREET, CITY, STATE, ZIP) \_\_\_\_\_ DATE OF CONTR: \_\_\_\_\_ AMT OF THIS CONTRIBUTION: \$ \_\_\_\_\_

AGGREGATE YEAR TO DATE CONTRIBUTIONS: \$ \_\_\_\_\_

SCHEDULE B: EXPENDITURES CONTINUATION PAGE

PAGE 01 OF 01

PAYMENT TO: (PRINT NAME) RESIDENTS TRUSTEES BOARD ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED) 1000 10TH ST NW AMOUNT OF EXPENDITURE: \$ 575.00

PURPOSE OF EXPENDITURE: REPRESENTATION DATE OF EXPENDITURE: 10/20/01

PAYMENT TO: (PRINT NAME) ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED) AMOUNT OF EXPENDITURE:

PURPOSE OF EXPENDITURE: DATE OF EXPENDITURE:

PAYMENT TO: (PRINT NAME) ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED) AMOUNT OF EXPENDITURE:

PURPOSE OF EXPENDITURE: DATE OF EXPENDITURE:

PAYMENT TO: (PRINT NAME) ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED) AMOUNT OF EXPENDITURE:

PURPOSE OF EXPENDITURE: DATE OF EXPENDITURE:

PAYMENT TO: (PRINT NAME) ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED) AMOUNT OF EXPENDITURE:

PURPOSE OF EXPENDITURE: DATE OF EXPENDITURE: