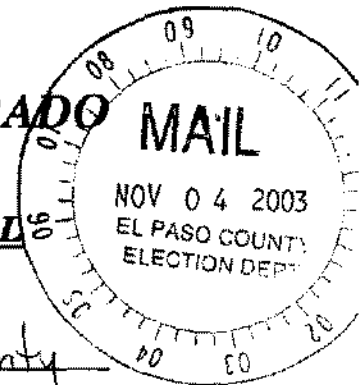




EL PASO COUNTY, COLORADO
OFFICE OF THE CLERK & RECORDER

P1 of 6



REGISTRATION OF POLITICAL, ISSUE AND POLITICAL PARTY COMMITTEES [CRS 1-45-109]

Full Organization Name: Libertarian Party of El Paso County
Street Address of Committee: P.O. Box 18271 Colorado Springs CO 80935-8271
(Number & Street Name) (City/State/Zip)
Mailing Address (If Different from Above):

Telephone Number: (719) 380-1383
Fax Number: () - () (If Applicable)
E-mail Address: glidewell@adelphia.net (Optional)
Name/Address/Phone of Person Authorized to act as Registered Agent for Committee:

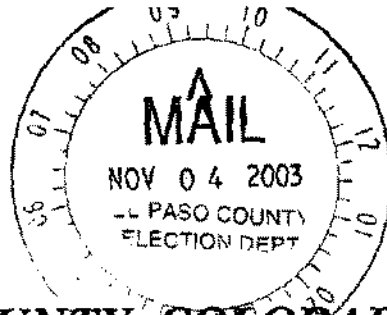
Patricia S. Glidewell 3525 Cowhand Dr C/S CO 80922
(Full name) (Address/City/State/Zip) (Phone) (Fax: If applic.)

List All Affiliated Candidates and Committees (if applicable):
N/A

Purpose or Nature of Interest of the Committee or Party:
To educate the public @ Libertarian principles, increase Libertarian Party membership, support public + private initiatives + work to elect Libertarian candidates to public office.

Patricia S. Glidewell 10 Apr 03
Signature of Authorized Agent Date

¹ A political committee in existence on January 1, 1997 shall register with the Secretary of State on or before April 1, 1997 pursuant to CRS 1-45-108(4)



page 1/6

**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):

Libertarian Party of El Paso County

ADDRESS OF COMMITTEE:

P.O. Box 18271 Colorado Springs CO 80935-8271
(Number/Street/City/State/Zip)

NAME AND ADDRESS OF FINANCIAL INSTITUTION:

Wells Fargo Bank West/Colo Spgs P.O. Box 5247 Denver CO 80274
(Name) (Number/Street/City/State/Zip)

TYPE OF REPORT:

_____ : 21 days prior to the election. Covering the period from the initial filing
(Date) to 5 days prior to this filing.

_____ : Friday before the election. Covering the period from 5 days prior to the
(Date) previous filing to 5 days prior to this filing.

_____ : 30 days after the election. Covering the period from 5 days prior to the
(Date) previous filing to 5 days prior to this filing.

Jan 1, 2003 - : November 1 of off-year. Covering the period from 5 days prior to the
(Date) Mar 31, 2003 previous filing to November 1.

Termination Report -OR- Is this report an amendment? Yes No

SUMMARY:	COLUMN A (This Period)	COLUMN B (Aggregate during Election Cycle)
1. Funds on Hand Beginning of Reporting Period:	\$ -92.99	XXXXXXXXXXXXXXXXXX
2. Total Contributions (From Ln 13):	\$ 1423.23	\$
3. Total Expenditures (From Ln 21):	\$ 310.48	\$
4. Funds on Hand at Close of Reporting Period:	\$ 1019.76	XXXXXXXXXXXXXXXXXX
5. Debts/Obligations Owed by the Committee:	\$ 0	XXXXXXXXXXXXXXXXXX
6. Pledges Owed to the Committee:	\$ 0	XXXXXXXXXXXXXXXXXX

p396

**DETAILED SUMMARY PAGE
OF CONTRIBUTIONS AND EXPENDITURES**

Page 2

NAME OF COMMITTEE: Libertarian Party of El Paso County

CONTRIBUTIONS: (Please provide spreadsheet format for detail items. ¹)	COLUMN A (Total This Report)	COLUMN B (Aggregate During Election Cycle)
Contributions (other than loans) from: Individuals/Persons (Not Political Committees) Total Itemized (Use spreadsheet for Details "Schedule A"):		
7.	\$ 90.00	\$
8. Non-Itemized (Total all Contributions Under \$20):	\$ 1333.23	\$
9. Political Party Committees:	\$ 0	\$
10. Other Political Committees:	\$ 0	\$
11. All Loans Received (Schedule C):	\$ 0	\$
12. Other receipts (Dividends, Interest, Refunds, Rebates, Etc.):	\$ 0	\$
13. TOTAL CONTRIBUTIONS: (Add all of the above items)	\$ 1423.23	\$
EXPENDITURES:		
14. Itemized Expenditures (\$20 and up) (Use Spreadsheet for Details "Schedule B"):	\$ 310.48	\$
15. Total of Non-Itemized Expenditures:	\$ 0	\$
16. Loan Repayments (Use "Schedule C"):	\$ 0	\$
17. Refunds to Contributions:	XXXXXXXXXX	XXXXXXXXXX
18. Individuals/Persons other than Political Committees:	\$ 0	\$
19. Political Party Committees:	\$ 0	\$
20. Other Political Committees:	\$ 0	\$
21. TOTAL EXPENDITURES: (Add all of the above items)	310.48	

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.

Patricia S. Glidewell
Type/Print Name of Agent

Patricia S. Glidewell 10 Apr 03
Signature of Agent Date

¹ The following is required for spreadsheet formats: Full name/address/zip; Date; Amount this Reporting Period; and Total Aggregate for Election Cycle per Contributor. For Contributions of \$100 and over, include occupation/employer. For expenditures, include the purpose of the expenditure. See attached examples of Schedules A and B.



EL PASO COUNTY, COLORADO
OFFICE OF THE CLERK & RECORDER
SCHEDULE A
CONTRIBUTIONS (PAGE 1)

(This schedule should reflect each item (7thru 12) of the Detailed Summary Page)

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).

Check appropriate box(es): Primary General Other (Specify):

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)		OCCUPATION/EMPLOYER	
Karlson Erik			
ADDRESS (NUMBER/STREET/CITY/STATE/ZIP):	DATE OF THIS CONTRIBUTION:	AMT OF THIS CONTRIBUTION:	
P.O. Box 6852 / Colorado Springs CO 80934	Mar 12, 03	\$ 40.00	
AGGREGATE CONTRIBUTIONS DURING ELECTION CYCLE:			
\$ 40.00			

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)		OCCUPATION/EMPLOYER	
Hale Aline			
ADDRESS (NUMBER/STREET/CITY/STATE/ZIP):	DATE OF THIS CONTRIBUTION:	AMT OF THIS CONTRIBUTION:	
2828 Airport Rd / Colorado Springs CO 80910	Feb 26, 03	\$ 50.00	
AGGREGATE CONTRIBUTIONS DURING ELECTION CYCLE:			
\$ 50.00			

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)		OCCUPATION/EMPLOYER	
ADDRESS (NUMBER/STREET/CITY/STATE/ZIP):	DATE OF THIS CONTRIBUTION:	AMT OF THIS CONTRIBUTION:	
		\$.	
AGGREGATE CONTRIBUTIONS DURING ELECTION CYCLE:			
\$.			

84
9/6



EL PASO COUNTY, COLORADO
OFFICE OF THE CLERK & RECORDER
SCHEDULE B
EXPENDITURES

(This schedule should reflect each item [14 thru 20] of the Detailed Summary Page.)
 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).

Check appropriate box(es): Primary General Other (Specify):

PAYMENT TO: (PRINT NAME) <u>Wells Fargo Bank West</u>	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED) <u>PO Box 5247 Denver CO 80274</u>	AMOUNT OF EXPENDITURE: <u>\$ 29.00</u>
PURPOSE OF THIS EXPENDITURE: <u>returned check fee</u>		DATE OF EXPENDITURE: <u>Jan 10, 03</u>

PAYMENT TO: (PRINT NAME) <u>Wells Fargo Bank West</u>	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED) <u>PO Box 5247 Denver CO 80274</u>	AMOUNT OF EXPENDITURE: <u>\$ 29.00</u>
PURPOSE OF THIS EXPENDITURE: <u>returned check fee</u>		DATE OF EXPENDITURE: <u>Jan 14, 03</u>

PAYMENT TO: (PRINT NAME) <u>US Postal Service</u>	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED) <u>GMF Post Office Colorado Springs CO 80910-9998</u>	AMOUNT OF EXPENDITURE: <u>\$ 90.00</u>
PURPOSE OF THIS EXPENDITURE: <u>bulky mail stamps + add'l postage acct</u>		DATE OF EXPENDITURE: <u>Feb 7, 03</u>

PAYMENT TO: (PRINT NAME) <u>Bill Blair</u>	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED) <u>2265 Willow Tree Grv #204 c/s CO 80910</u>	AMOUNT OF EXPENDITURE: <u>\$ 35.75</u>
PURPOSE OF THIS EXPENDITURE: <u>newsletter printing expense - Jan</u>		DATE OF EXPENDITURE: <u>7 Feb, 03</u>

95 of 6

SCHEDULE B: EXPENDITURES CONTINUATION PAGE

PAYMENT TO: (PRINT NAME) <u>Scott Graves</u>	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED) <u>3724 E. LaSalle Colorado Springs CO 80909</u>	AMOUNT OF EXPENDITURE: \$ <u>86.51</u>
PURPOSE OF THIS EXPENDITURE: <u>newsletter printing expense Nov-Dec</u>		DATE OF EXPENDITURE: <u>Feb 12, 03</u>

PAYMENT TO: (PRINT NAME) <u>Bill Blair</u>	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED) <u>2265 Willow Tree Grv #204 Colorado Springs CO ⁸⁰⁹¹⁰</u>	AMOUNT OF EXPENDITURE: \$ <u>40.22</u>
PURPOSE OF THIS EXPENDITURE: <u>newsletter printing expense - Feb</u>		DATE OF EXPENDITURE: <u>12 Mar, 03</u>

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

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

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

P6 of 6