

**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):

Pikes Peak Green Party

ADDRESS OF COMMITTEE:

P.O. Box 1341 / Colorado Springs / CO / 80901

(Number/Street/City/State/Zip)

NAME AND ADDRESS OF FINANCIAL INSTITUTION:

People's National Bank 102 S. Tejon St. Colorado Springs CO 80903

(Name)

(Number/Street/City/State/Zip)

TYPE OF REPORT:

7/23/02 : 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.

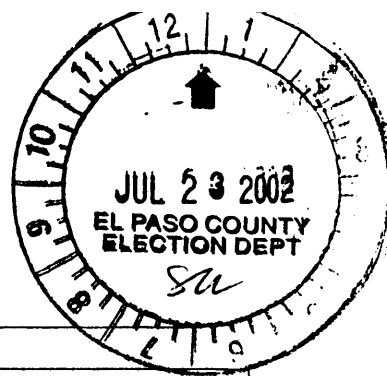
\_\_\_\_\_ : November 1 of off-year. Covering the period from 5 days prior to the  
(Date) previous filing to November 1.

: Termination Report -OR- 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:	\$ 309.07	XXXXXXXXXXXXXXXX
2. Total Contributions (From Ln 13):	\$ 779.00	\$
3. Total Expenditures (From Ln 21):	\$ 308.10	\$
4. Funds on Hand at Close of Reporting Period:	\$ 779.97	XXXXXXXXXXXXXXXX
5. Debts/Obligations Owed by the Committee:	\$	XXXXXXXXXXXXXXXX
6. Pledges Owed to the Committee:	\$	XXXXXXXXXXXXXXXX

CONTINUE TO PAGE 2

DETAILED SUMMARY PAGE  
OF CONTRIBUTIONS AND EXPENDITURES



Page 2

NAME OF COMMITTEE: Alex Peak Green Party

CONTRIBUTIONS: (Please provide spreadsheet format for detail items. <sup>1</sup> )	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"):	\$ 590.00	\$ 590.00
8. Non-Itemized (Total all Contributions Under \$20):	\$ 189.00	\$ 189.00
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)	\$ 779.00	\$ 779.00
<b>EXPENDITURES:</b>		
14. Itemized Expenditures (\$20 and up) (Use Spreadsheet for Details "Schedule B"):	\$ 308.10	\$ 308.10
15. Total of Non-Itemized Expenditures:	\$	\$
16. Loan Repayments (Use "Schedule C"):	\$	\$
17. Refunds to Contributions:	XXXXXXXXXX	XXXXXXXXXX
18. Individuals/Persons other than Political Committees:	\$	\$
19. Political Party Committees:	\$	\$
20. Other Political Committees:	\$	\$
21. TOTAL EXPENDITURES: (Add all of the above items)	308.10	308.10

**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.

Craig Terry  
Type/Print Name of Agent

Craig Terry  
Signature of Agent

7/22/02  
Date

<sup>1</sup> The following is required for spreadsheet formats: Full name/address/zip; Date; Amount this Reporting Period; and Total Aggregate Year to Date per Contributor. 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 [7 thru 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  $\alpha$  appropriate box(es):  Primary  General  Other (Specify):

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)	OCCUPATION/EMPLOYER:	DATE OF CONTRI:	AMT OF THIS CONTRIBUTION:
W I S O M K A R L	U n k n o w n	0 3 1 9 0 2	\$ 2 0 . 0 0
ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)			
3 6 1 6 E P A R K M C O R U T I L I A S E D R C O L O R A D O S P R I N G S C O		8 0 9 1 7	
AGGREGATE YEAR TO DATE CONTRIBUTIONS:			
\$ 2 0 . 0 0			

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)	OCCUPATION/EMPLOYER:	DATE OF CONTRI:	AMT OF THIS CONTRIBUTION:
J A M E S W H I T E	U n k n o w n	0 5 0 4 0 2	\$ 2 5 . 0 0
ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)			
2 0 E S T U A I N C O T O R A D O S P R I N G S C O		8 0 9 0 3	
AGGREGATE YEAR TO DATE CONTRIBUTIONS:			
\$ 2 5 . 0 0			

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)	OCCUPATION/EMPLOYER:	DATE OF CONTRI:	AMT OF THIS CONTRIBUTION:
P H Y L L I S L U C E R O	R E T I R E D	0 5 2 1 0 2	\$ 5 0 0 . 0 0
ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)			
1 2 2 5 B A G C O C K R D C O L O R A D O S P R I N G S C O		8 0 9 1 5	
AGGREGATE YEAR TO DATE CONTRIBUTIONS:			
\$ 5 0 0 . 0 0			

SCHEDULE A: CONTRIBUTIONS CONTINUATION PAGE

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)

OCCUPATION/EMPLOYER:

DOYLE JOYCE Unknkn

ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)

DATE OF CONTRI:

AMT OF THIS CONTRIBUTION:

838 E MORENO AVE COLORADO SPRINGS CO 80903 052602 \$20.00

AGGREGATE YEAR TO DATE CONTRIBUTIONS:

\$20.00

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)

OCCUPATION/EMPLOYER:

DEARMONT PAUL Q Unknkn

ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)

DATE OF CONTRI:

AMT OF THIS CONTRIBUTION:

582 OBSERVATORY DRIVE COLORADO SPRINGS CO 80909 060402 \$25.00

AGGREGATE YEAR TO DATE CONTRIBUTIONS:

\$25.00

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)

OCCUPATION/EMPLOYER:

Empty name and occupation fields

ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)

DATE OF CONTRI:

AMT OF THIS CONTRIBUTION:

Empty address, date, and amount fields

AGGREGATE YEAR TO DATE CONTRIBUTIONS:

\$0.00

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)

OCCUPATION/EMPLOYER:

Empty name and occupation fields

ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)

DATE OF CONTRI:

AMT OF THIS CONTRIBUTION:

Empty address, date, and amount fields

AGGREGATE YEAR TO DATE CONTRIBUTIONS:

\$0.00

SCHEDULE B: EXPENDITURES CONTINUATION PAGE

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
NOELLE UANCE	3872 GLENMEADOW DR. CO SAS CO	\$ 34.00
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
REIMBURSEMENT FOR POSTAGE		061002

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
GREG BARBER COMPANY	330 E. 65th ST NEW YORK NY 10021	\$ 66.00
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
PAPER/LETTERHEAD/ENVELOPES		070202

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
HILLSIDE COMMUNITY	125 S. INSTITUTE CO SAS CO	\$ 40.00
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
ROOM RENTAL		071602

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
NOELLE UANCE	3872 GLENMEADOW DR. CO SAS CO	\$ 20.90
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
REIMBURSEMENT FOR POSTAGE		071602

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
		\$ .00
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE



**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.)

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Check  appropriate boxes:  Primary  General  Other (Specify):

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
GREG BARBER COMPANY	330 E GSFH ST NEW YORK NY 11021	\$ 50.00
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
PAPER/letterhead/envelopes		013002

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
POSTMASTER	201 E Aikes NEAK 80901	\$ 19.00
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
6 MONTHS NO BOX		022002

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
DOCUMART	723 E Fillmore Colorado Springs CO 80907	\$ 3.20
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
PRINTED Brochures		031402

PAYMENT TO: (PRINT NAME)	ADDRESS; (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
PRO-Choice Coalition	ACCSS PO Box 732 CO SAS 80901-732	\$ 25.00
PURPOSE OF EXPENDITURE:		DATE OF EXPENDITURE
MEMBERSHIP DUES		050502