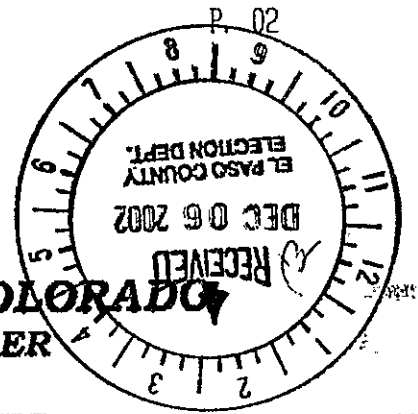




EL PASO COUNTY, COLORADO
OFFICE OF THE CLERK & RECORDER



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:

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

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

12/5/02 : 30 days after the election. Covering the period from 5 days prior to the previous filing to 5 days prior to this filing.
 (Date)

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

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:	\$ 926.59	XXXXXXXXXXXXXXXX
2. Total Contributions (From Ln 13):	\$ 40	\$ 2044.27
3. Total Expenditures (From Ln 21):	\$ 36	\$ 1422.75
4. Funds on Hand at Close of Reporting Period:	\$ 930.59	XXXXXXXXXXXXXXXX
5. Debts/Obligations Owed by the Committee:	\$ 0	XXXXXXXXXXXXXXXX
6. Pledges Owed to the Committee:	\$ 0	XXXXXXXXXXXXXXXX

CONTINUE TO PAGE 2

**DETAILED SUMMARY PAGE
OF CONTRIBUTIONS AND EXPENDITURES**

Page 2

NAME OF COMMITTEE: Pikes Peak Green Party

CONTRIBUTIONS: (Please provide spreadsheet format for detail items. ¹)	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"):		
7.	\$ 0	\$ 1500
8. Non-Itemized (Total all Contributions Under \$20):	\$ 40	\$ 544.27
9. Political Party Committees:	\$ 0	\$ 0
10. Other Political Committees:	\$ 0	\$ 0
11. All Loans Received (Schedule C):	\$ 0	\$ 0
12. Other receipts (Dividends, Interest, Refunds, Rebates, Etc.):	\$ 0	\$ 0
13. TOTAL CONTRIBUTIONS: (Add all of the above items)	\$ 40	\$ 2044.27
EXPENDITURES:		
14. Itemized Expenditures (\$20 and up) (Use Spreadsheet for Details "Schedule B"):	\$ 36	\$ 1422.75
15. Total of Non-Itemized Expenditures:	\$ 0	\$ 0
16. Loan Repayments (Use "Schedule C"):	\$ 0	\$ 0
17. Refunds to Contributions:	XXXXXXXXXXXX	XXXXXXXXXXXX
18. Individuals/Persons other than Political Committees:	\$ 0	\$ 0
19. Political Party Committees:	\$ 0	\$ 0
20. Other Political Committees:	\$ 0	\$ 0
21. TOTAL EXPENDITURES: (Add all of the above items)	\$ 36	\$ 1422.75

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 O Terry
Type/Print Name of Agent

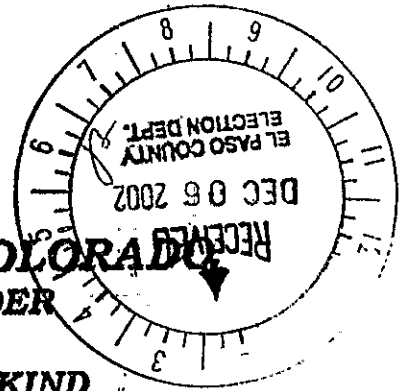
Craig O Terry
Signature of Agent

12/5/02
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 expenditures, include the purpose of the expenditure. See attached examples of Schedules A and B.



EL PASO COUNTY, COLORADO
OFFICE OF THE CLERK & RECORDER



STATEMENT OF ITEMIZED CONTRIBUTIONS IN KIND

Name of Committee (in Full):

Mikes Park Green Party

Address:

P.O. Box 1341 Colorado Springs CO 80901

210-5144

(Street)

(City/State/Zip)

(Phone)

Reporting Date: (If any reporting date falls on a weekend, the filing may be made the next business day.)

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

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

12/5/02 : 30 days after the election. Covering the period from 5 days prior to the previous filing to 5 days prior to this filing.
(Date)

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

Full Name, Address and Zip of Contributor: Fair Market Value: Date Received:

1. *Gustav A Melner* \$ *66.83* *10/15/02*
6810 Gillman Grove CO Spgs 80918

Contribution in kind for: Primary General Other (Specify): _____

2. _____ \$ _____

Contribution in kind for: Primary General Other (Specify): _____

3. _____ \$ _____

Contribution in kind for: Primary General Other (Specify): _____

4. _____ \$ _____

Contribution in kind for: Primary General Other (Specify): _____

I certify that I have examined this statement of contribution in kind and to the best of my knowledge and belief it is true, correct and complete.

(Type or Print Name of Agent)

(Signature of Agent)

(Date)

Note: Willful or intentional submission of false, erroneous or incomplete information may be sanctioned as provided by law.



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) <i>Pikes Peak Justice And Peace Commission</i>	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED) <i>29 S, Institute Colorado Springs CO 80903</i>	AMOUNT OF EXPENDITURE: \$ <i>36.00</i> DATE OF EXPENDITURE: <i>11/10, 02</i>
PURPOSE OF THIS EXPENDITURE: <i>Room Use Fee</i>		
PAYMENT TO: (PRINT NAME)	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE: \$ _____ DATE OF EXPENDITURE:
PURPOSE OF THIS EXPENDITURE:		
PAYMENT TO: (PRINT NAME)	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE: \$ _____ DATE OF EXPENDITURE:
PURPOSE OF THIS EXPENDITURE:		
PAYMENT TO: (PRINT NAME)	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP: POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE: \$ _____ DATE OF EXPENDITURE:
PURPOSE OF THIS EXPENDITURE:		