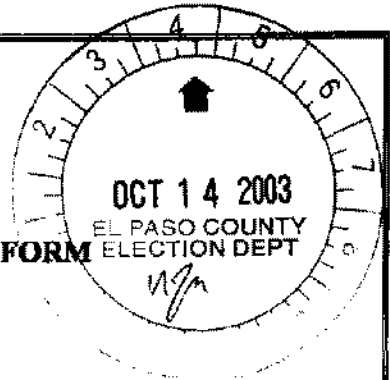


Colorado Secretary of State
1560 Broadway, Suite 200
Denver, CO 80202
(303) 894-2680
(303) 894-7732 Fax
www.sos.state.co.us/



CANDIDATE COMMITTEE FUNDS TRANSFER FORM

[CRS 1-45-106 (1)(a)(I)(B)]

Full Name of Committee: Committee to Elect Sallie Clark Mayor

Address (Physical): 1102 W. Pikes Peak Avenue, Colorado Springs, CO 80904

Mailing Address (if different from above): PO Box 359, Colorado Springs, CO 80901

Telephone Number: 719-471-4023 FAX Number: 719-471-4740

Purpose of Transfer: Transfer balance from Campaign Account

TRANSFERS THE FOLLOWING: (Check appropriate box(es) and fill in amount; then total)

Monetary Amount: \$ 4,149.41

Debt Balance: \$ _____

Loan Balance: \$ _____

TOTAL AMOUNT: \$ 4,149.41

TO

Full Name of Committee: Committee to Elect Sallie Clark Commissioner District 3

Address (Physical): same as above

Mailing Address (if different from above): PO Box 38279, Colorado Springs, CO 80937

Telephone Number: same FAX Number: same

Purpose of Receipt: Campaign Committee

Sallie Clark

Signature of Candidate

10/14/03

Date

Sallie Clark

10/14/03

Date

Signature of Registered Agent (Transferring Agent)

Sallie Clark

10/14/03

Date

Signature of Registered Agent (Receiving Agent)