



**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 Susan Krebs

ADDRESS OF COMMITTEE:

8051 Horizon Dr. Colo Spgs. CO 80920  
(Number/Street/City/State/Zip)

NAME AND ADDRESS OF FINANCIAL INSTITUTION:

HP Federal Credit Union 1900 Garden of the Gods Rd  
(Name) (Number/Street/City/State/Zip)  
P.O. Box 2197 Colo Spgs 80907

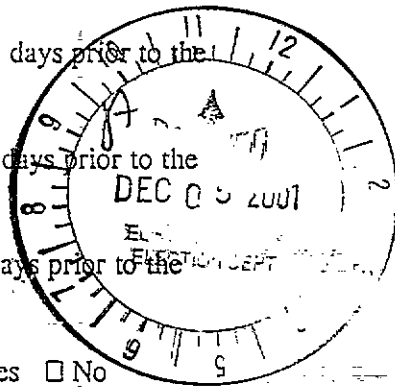
TYPE OF REPORT:

\_\_\_\_\_ : 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.

Dec 16 : 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

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:	\$ 251.50	XXXXXXXXXXXXXXXXXX
2. Total Contributions (From Ln 13):	\$ 375.00	\$ 7220.00
3. Total Expenditures (From Ln 21):	\$ <del>6000</del> 621.50	\$ 7215.00
4. Funds on Hand at Close of Reporting Period:	\$ 5.00	XXXXXXXXXXXXXXXXXX
5. Debts/Obligations Owed by the Committee:	\$ 2773.50	XXXXXXXXXXXXXXXXXX
6. Pledges Owed to the Committee:	\$	XXXXXXXXXXXXXXXXXX

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**DETAILED SUMMARY PAGE  
OF CONTRIBUTIONS AND EXPENDITURES**

Page 2

NAME OF COMMITTEE: Committee to Re-elect Susan Krebs

CONTRIBUTIONS: (Please provide spreadsheet format for detail items.)	COLUMN A (Total This Report)	COLUMN B (Calendar Year)
7. Contributions (other than loans) from Individuals/Persons (Not Political Committees) Total Itemized (Use spreadsheet for Details "Schedule A"):	\$ 375.00	\$ 7220.00
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. <b>TOTAL CONTRIBUTIONS:</b> (Add all of the above items)	\$ 375.00	\$ 7220.00
<b>EXPENDITURES:</b>		
14. Itemized Expenditures (\$20 and up) (Use Spreadsheet for Details "Schedule B"):	\$ 60.00	\$ 6653.50
15. Total of Non-Itemized Expenditures:	\$	\$
16. Loan Repayments (Use "Schedule C"):	\$ 561.50	\$ 561.50
17. Refunds to Contributions:	XXXXXXXXXXXX	XXXXXXXXXXXX
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)	621.50	7215.00

**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.

Lisa Montijo  
Type/Print Name of Agent

[Signature]  
Signature of Agent

12/05/01  
Date

<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.



**EL PASO COUNTY, COLORADO**  
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**SCHEDULE C: LOANS**

Name of Committee (In Full):

Committee to Re-elect Susan Krebs

Full Name, Address and Zip Code of Loan Source:

Ken Krebs 8051 Horizon Dr. Colo Spgs 80920

Original Amt. of Loan:      Cumulative Payments to Date:      Balance Outstanding      Close of this Period:

1335.00                      561.50                      773.50

Election:       Primary       General       Other (Specify): \_\_\_\_\_

Terms: Date Incurred: 10-24-20 Date Due: \_\_\_\_\_ Interest Rate: \_\_\_\_\_ %

List All Endorsers or Guarantors (If Any):

1. Name/Address/Zip: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

2. Name/Address/Zip: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

3. Name/Address/Zip: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

(If there are additional Guarantors, please attach additional page using the above format.)

(Loans received this reporting period are reported on line 11 of the Detailed Summary Page.)  
(Loan payments made this reporting period are reported on line 16 of the Detailed Summary Page.)

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.) OCCUPATION/EMPLOYER:

R W S A M N E A G L E B R E T S O N E D I C A T E R

ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP) 539 D B E T T E R S W A Y C O L I E K P O S C A 8 0 9 1 9

DATE OF CONTRI: 1 1 0 5 0 1

AMT OF THIS CONTRIBUTION: \$ 0 0 0 0 0 0

AGGREGATE YEAR TO DATE CONTRIBUTIONS: \$ 0 0 0 0 0 0

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.) OCCUPATION/EMPLOYER:

R D C K W E L L M I N C H O W C O N S U I H A F S C U N S U I H A F S

ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP) 1 3 7 3 A V S T I N B L D F F S P R K W Y C O L I E K P O S C A 8 0 9 1 8

DATE OF CONTRI: 1 1 0 5 0 1

AMT OF THIS CONTRIBUTION: \$ 0 0 0 0 0 0

AGGREGATE YEAR TO DATE CONTRIBUTIONS: \$ 0 0 0 0 0 0

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.) OCCUPATION/EMPLOYER:

M A B S D E S I E N A S B D E S I G N E A S

ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP) P O B O X 1 4 0 3 8 C O L O S P O S C A 8 0 9 1 4

DATE OF CONTRI: 1 1 0 5 0 1

AMT OF THIS CONTRIBUTION: \$ 0 0 0 0 0 0

AGGREGATE YEAR TO DATE CONTRIBUTIONS: \$ 0 0 0 0 0 0

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.) OCCUPATION/EMPLOYER:

K E M T P E R R E D R V C I O S E R

ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP) 4 0 4 E A C H T R E E C I R C A S T L E R O C K B O I E Y 1 1 0 5 0 1

DATE OF CONTRI: 1 1 0 5 0 1

AMT OF THIS CONTRIBUTION: \$ 0 0 0 0 0 0

AGGREGATE YEAR TO DATE CONTRIBUTIONS: \$ 0 0 0 0 0 0

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)  
RALEIGH BRADLEY  
OCCUPATION/EMPLOYER:  
DEVELOPER  
ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)  
3225 CEDARHILLS DRIVE 50961080904  
DATE OF CONTRI: 11/06/07  
AMT OF THIS CONTRIBUTION:  
\$ 100.00  
AGGREGATE YEAR TO DATE CONTRIBUTIONS:  
\$ 100.00

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)  
VAMHAGE WOMELOTT  
OCCUPATION/EMPLOYER:  
ADVISORS  
ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)  
6170 MARK DABLI MB 1050961080907  
DATE OF CONTRI: 11/08/07  
AMT OF THIS CONTRIBUTION:  
\$ 100.00  
AGGREGATE YEAR TO DATE CONTRIBUTIONS:  
\$ 100.00

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)  
[Blank]  
OCCUPATION/EMPLOYER:  
[Blank]  
ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)  
[Blank]  
DATE OF CONTRI:  
[Blank]  
AMT OF THIS CONTRIBUTION:  
\$ [Blank]  
AGGREGATE YEAR TO DATE CONTRIBUTIONS:  
\$ [Blank]

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)  
[Blank]  
OCCUPATION/EMPLOYER:  
[Blank]  
ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)  
[Blank]  
DATE OF CONTRI:  
[Blank]  
AMT OF THIS CONTRIBUTION:  
\$ [Blank]  
AGGREGATE YEAR TO DATE CONTRIBUTIONS:  
\$ [Blank]

