



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 ELECT SANDY SHAKES SCHOOL BOARD SCH DIST # 11

ADDRESS OF COMMITTEE:

~~4000~~ 3255 WADE CIR 80917

(Number/Street/City/State/Zip)

NAME AND ADDRESS OF FINANCIAL INSTITUTION:

WESTERN NATIONAL BANK 102 N CASCADE AVE

(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.

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

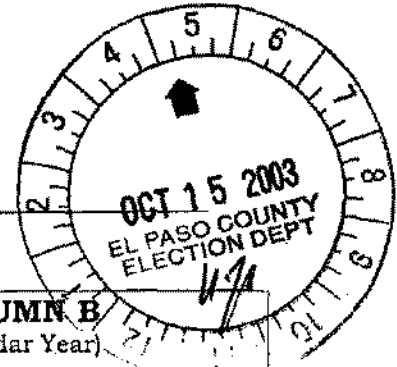
: Termination Report

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:	\$ 0	XXXXXXXXXXXXXXXXXX
2. Total Contributions (From Ln 13):	\$ 2950	\$
3. Total Expenditures (From Ln 21):	\$ 2240	\$
4. Funds on Hand at Close of Reporting Period:	\$ 710	XXXXXXXXXXXXXXXXXX
5. Debts/Obligations Owed by the Committee:	\$ 0	XXXXXXXXXXXXXXXXXX
6. Pledges Owed to the Committee:	\$ 0	XXXXXXXXXXXXXXXXXX

CONTINUE TO PAGE 2

**DETAILED SUMMARY PAGE
OF CONTRIBUTIONS AND EXPENDITURES
Page 2**



NAME OF COMMITTEE: _____

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	\$
8. Non-Itemized (Total all Contributions Under \$20):	\$ 0	\$
9. Political Party Committees:	\$ 0	\$
10. Other Political Committees:	\$ 0	\$
11. All Loans Received (Schedule C):	\$	\$
12. Other receipts (Dividends, Interest, Refunds, Rebates, Etc.):	\$	\$
13. TOTAL CONTRIBUTIONS: (Add all of the above items)	\$	\$
EXPENDITURES:		
14. Itemized Expenditures (\$20 and up) (Use Spreadsheet for Details "Schedule B"):	\$ 2090	\$
15. Total of Non-Itemized Expenditures:	\$ 150	\$
16. Loan Repayments (Use "Schedule C"):	\$ 0	\$
17. Refunds to Contributions:	XXXXXXXXXXXX	XXXXXXXXXXXX
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)	2240	

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 E WHITNEY
Type/Print Name of Agent

Craig Whitney
Signature of Agent

10/15/03
Date

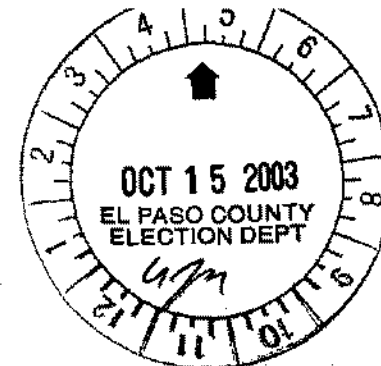
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¹ The following is required for spreadsheet formats: Full name/address/zip; Date; Amount this Reporting Period; and Total Aggregate for Election Cycle per Contributor. For expenditures, include the purpose of the expenditure. See attached examples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



EL PASO COUNTY, COLORADO
OFFICE OF THE CLERK & RECORDER

SCHEDULE A
CONTRIBUTIONS (PAGE 1)



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

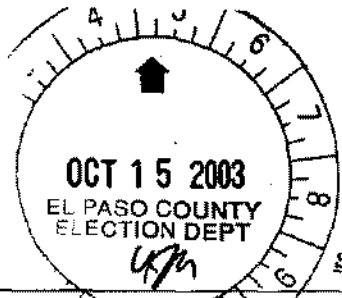
No information copied from such reports shall be sold or used by any person for the purpose of soliciting contributions or for any commercial purpose. CRS 1-45-111(1)(d).

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

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)		
SHAKES SANDY	DATE OF THIS CONTRIBUTION:	AMT OF THIS CONTRIBUTION:
ADDRESS (NUMBER/STREET/CITY/STATE/ZIP):		\$ 100 . ⁰⁰
AGGREGATE CONTRIBUTIONS DURING ELECTION CYCLE:		
\$ _____		

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)		
C EDWARD MCVANEY	DATE OF THIS CONTRIBUTION:	AMT OF THIS CONTRIBUTION:
ADDRESS (NUMBER/STREET/CITY/STATE/ZIP):		\$ 950 . ⁻
1201 GREEN OAKS DR GREENWOOD VILLAGE CO 80121		
AGGREGATE CONTRIBUTIONS DURING ELECTION CYCLE:		
\$ 950 . ⁻		

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)		
JOHN V SAEMAN & CAROLYN A SAEMAN	DATE OF THIS CONTRIBUTION:	AMT OF THIS CONTRIBUTION:
ADDRESS (NUMBER/STREET/CITY/STATE/ZIP):		\$ 950 . ⁻
270 SAINT PAUL STREET SUITE 300 DENVER CO 80206		
AGGREGATE CONTRIBUTIONS DURING ELECTION CYCLE:		
\$ _____		



SCHEDULE A: CONTRIBUTIONS CONTINUATION PAGE

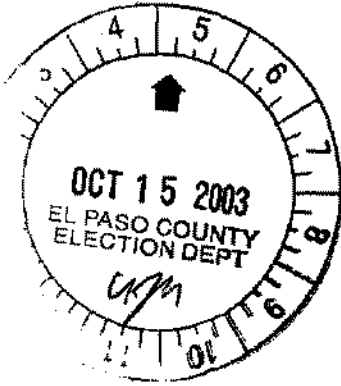
PAGE OF

CONTRIBUTORS NAME (PRINT LAST NAME, FIRST NAME, M.I.)
 JOHN V SAEMAN + CAROLYN A SAEMAN
 ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP)
 270 SAINT PAUL STREET SUITE 300 DENVER CO 80206
 DATE OF THIS CONTRIBUTION:
 9/23, 06
 AMT OF THIS CONTRIBUTION:
 \$ 950.-
 AGGREGATE CONTRIBUTIONS DURING ELECTION CYCLE:
 \$ 950.-

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

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

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



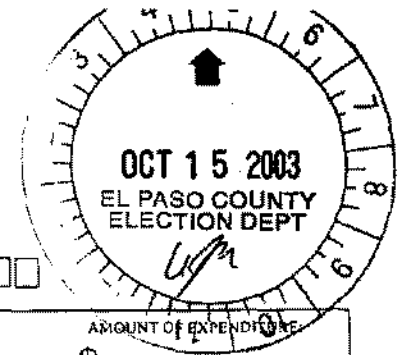
EL PASO COUNTY, COLORADO
OFFICE OF THE CLERK & RECORDER
SCHEDULE B
EXPENDITURES

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

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

PAYMENT TO: (PRINT NAME)	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
US Postal Service	STAMPS	\$ 740.00
PURPOSE OF THIS EXPENDITURE:		DATE OF EXPENDITURE: Oct 6, 03
PAYMENT TO: (PRINT NAME)	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
PRINTING		\$ 350.-
PURPOSE OF THIS EXPENDITURE:		DATE OF EXPENDITURE: Oct 1, 03
PAYMENT TO: (PRINT NAME)	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
Signs		\$ 1000.-
PURPOSE OF THIS EXPENDITURE:		DATE OF EXPENDITURE: Sept 24, 03
PAYMENT TO: (PRINT NAME)	ADDRESS: (NUMBER/STREET/CITY/STATE/ZIP : POSTAL ABBREVIATIONS REQUIRED)	AMOUNT OF EXPENDITURE:
		\$.-
PURPOSE OF THIS EXPENDITURE:		DATE OF EXPENDITURE:



SCHEDULE B: EXPENDITURES CONTINUATION PAGE

PAGE OF

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: _____
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: _____