CITY OF COLORADO SPRINGS

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Person:	Committee to Elect Andres Pico

As Shown On Registration

Address of Committee/Person:	5390 Artistic Circle
City, State & Zip Code:	Colorado Springs, CO 80917
Committee Type:	Non-Profit Candidate Committee
Name and Address of Financial Institution:	ENT Federal Credit Union 6060 Championship View Colorado Springs, CO 80922

Type of Report

☒ Regularly Scheduled Filing.

☐ Amended Filing. This amends previous report filed on (date) _____
Submit changes or new information ONLY

☐ Final Filing.

Reporting Period Covered: January 11, 2013 (Date) **Through** January 26, 2013 (Date)

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	$ Ø
2	Total Monetary Contributions (line 11)	$ 205=
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	$ 205=
4	Total Spending (line 20)	$ 40=
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 – line 4)	$ 165

Authorization (Must be completed by either the Registered Agent **OR** the Candidate): *I hereby certify and declare, under penalty of perjury, that to the best of my knowledge or belief the information or statements on this form, including all schedules, statements, and attachments, are true and correct, and that to the best of my knowledge or belief all contributions received during this reporting period including any contributions received in the form of membership dues transferred by a membership organization are from permissible sources.*

Print Registered Agent's Name: _____

Registered Agent's Signature: _____ Date: _____

Print Candidate Name: Andres G. Pico

Candidates Signature: Andres Pico Date: 1 Feb 13

2013 FEB -1 A 11:02

CITY CLERK'S OFFICE

DETAILED SUMMARY

Full Name of Committee/Person: Committee to Elect Andres Pico

Current Reporting Period: January 11, 2013 **Through:** January 26, 2013

	Funds on hand at the beginning of reporting period (Monetary Only)	$ Ø
6	**Itemized Contributions $20 or More** (Please list on Schedule "A")	$ 205=
7	**Total of Non-Itemized Contributions** ($19.99 or Less) (Number of Contributions of $19.99 or Less)	$ Ø
8	**Loans Received** (Please list on Schedule "C")	$ Ø
9	**Total of Other Receipts** (Interest, Dividends, etc.)	$ Ø
10	**Returned Expenditures (from recipient)** (Please list on Schedule "D")	$ Ø
11	**Total Monetary Contributions** (Total of lines 6 through 10)	$ 205
12	**Total Non-Monetary Contributions** (From Statement of Non-Monetary Contributions)	$ Ø
13	**Total Contributions** (Line 11 + line 12)	$ 205=
14	**Itemized Expenditures $20 or More** (Please list on Schedule "B")	$ 40=
15	**Total of Non-Itemized Expenditures** (Expenditures of $19.99 or Less)	$ Ø
16	**Loan Repayments Made** (Please list on Schedule "C")	$ Ø
17	**Returned Contributions (To donor)** (Please list on Schedule "D")	$ Ø
18	**Closeout Distributions** (Balance must be zero. Please attach Schedule E.)	$ Ø
19	**(Intentionally left Blank)**	$
20	**Total Spending** (Lines 14 through 17)	$ 40

Schedule A-1 - Itemized Contributions Statement ($20 or More)

Full Name of Committee/Person: Committee to Elect Andres Pico

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. Name (Last, First): Pico, Andres
2. Address: 5390 Artistic Circle
3. City/State/Zip: Colorado Springs, CO 80917
4. Description: Monetary
5. Employer (mandatory if employed): Serco, Inc
6. Occupation (mandatory if employed): Project Manager
7. Date Accepted: January 11, 2013
8. Aggregate Amount This Election Cycle: $205=
9. Contribution Amount This Reporting Period: $205=

1. Name (Last, First): N/A
2. Address:
3. City/State/Zip:
4. Description:
5. Employer (mandatory if employed):
6. Occupation (mandatory if employed):
7. Date Accepted:
8. Aggregate Amount This Election Cycle:
9. Contribution Amount This Reporting Period: $

Schedule A-1 Itemized Contributions Statement ($20 or more)
Page 3 of 14
Use additional pages as necessary

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Description: _____
5. Employer (mandatory if employed): _____
6. Occupation (mandatory if employed): _____
7. Date Accepted: _____
8. Aggregate Amount This Election Cycle: _____
9. Contribution Amount This Reporting Period: $_____

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Description: _____
5. Employer (mandatory if employed): _____
6. Occupation (mandatory if employed): _____
7. Date Accepted: _____
8. Aggregate Amount This Election Cycle: _____
9. Contribution Amount This Reporting Period: $_____

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Description: _____
5. Employer (mandatory if employed): _____
6. Occupation (mandatory if employed): _____
7. Date Accepted: _____
8. Aggregate Amount This Election Cycle: _____
9. Contribution Amount This Reporting Period: $_____

Schedule A-1 Itemized Contributions Statement ($20 or more)
Page 4 of 14
Use additional pages as necessary

Schedule A-2 - Statement of Non-Monetary Contributions

Full Name of Committee/Person: Committee to Elect Andres Pico

PLEASE PRINT/TYPE

1. Name (Last, First): N/A
2. Address:
3. City/State/Zip:
4. Description:
5. Employer (mandatory if employed):
6. Occupation (mandatory if employed):
7. Date Provided:
8. Aggregate Amount:
9. Fair Market Value: $

1. Name (Last, First): N/A
2. Address:
3. City/State/Zip:
4. Description:
5. Employer (mandatory if employed):
6. Occupation (mandatory if employed):
7. Date Provided:
8. Aggregate Amount:
9. Fair Market Value: $

Schedule A-2 Statement of Non-Monetary Contributions ($20 or more)
Page 5 of 14
Use additional pages as necessary

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Description: _____
5. Employer (mandatory if employed): _____
6. Occupation (mandatory if employed): _____
7. Date Provided: _____
8. Aggregate Amount: _____
9. Fair Market Value: $_____

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Description: _____
5. Employer (mandatory if employed): _____
6. Occupation (mandatory if employed): _____
7. Date Provided: _____
8. Aggregate Amount: _____
9. Fair Market Value: $_____

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Description: _____
5. Employer (mandatory if employed): _____
6. Occupation (mandatory if employed): _____
7. Date Provided: _____
8. Aggregate Amount: _____
9. Fair Market Value: $_____

Schedule A-2 Statement of Non-Monetary Contributions ($20 or more)
Page 6 of 14
Use additional pages as necessary

Schedule B – Itemized Expenditures Statement ($20 or more)

Full Name of Committee/Person: Committee to Elect Andres Pico

PLEASE PRINT/TYPE

1. Name: City of Colorado Springs
2. Address:
3. City/State/Zip:
4. Purpose of Expenditure: Sign Permit
5. Date Expended: January 22, 2013
6. Amount: $40 = $

1. Name: N/A
2. Address:
3. City/State/Zip:
4. Purpose of Expenditure:
5. Date Expended:
6. Amount: $

1. Name:
2. Address:
3. City/State/Zip:
4. Purpose of Expenditure:
5. Date Expended:
6. Amount: $

Schedule B Itemized Expenditures Statement ($20 or more)
Page 7 of 14
Use additional pages as necessary

1. Name: _____
2. Address: _____
3. City/State/Zip: _____
4. Purpose of Expenditure: _____
5. Date Expended: _____
6. Amount: $_____

1. Name: _____
2. Address: _____
3. City/State/Zip: _____
4. Purpose of Expenditure: _____
5. Date Expended: _____
6. Amount: $_____

1. Name: _____
2. Address: _____
3. City/State/Zip: _____
4. Purpose of Expenditure: _____
5. Date Expended: _____
6. Amount: $_____

Schedule B Itemized Expenditures Statement ($20 or more)
Page 8 of 14
Use additional pages as necessary

Schedule C - Loans

Full Name of Committee/Person: Committee to Elect Andres Pico

LOAN SOURCE

Name (Last, First or Institution): N/A

Address: _____

City/State/Zip: _____

Original Amount of Loan: $_____ Interest Rate: _____

Loan Amount Received This Reporting Period: $_____

Principal Amount Paid This Reporting Period: $_____

Interest Amount Paid This Reporting Period: $_____

Total of All Loans This Reporting Period: $_____
(Place on line 8 of Detailed Summary Report)

Amount Repaid This Reporting Period: $_____
(Amount Repaid is sum of Principal & Interest entered on Detail Summary)

Total Repayments Made: $_____
(Sum of Schedule C pages, Place on line 16 of Detailed Summary)

Outstanding Balance: $_____

TERMS OF LOAN: _____ _____
Date Loan Received Due Date for Final Payment

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, City, State, Zip	Amount Guaranteed

Schedule C Loans
Page 9 of 14
Use additional pages as necessary

Full Name of Committee/Person: _____

LOAN SOURCE

Name (Last, First or Institution): _____

Address: _____

City/State/Zip: _____

Original Amount of Loan: $_____ Interest Rate: _____

Loan Amount Received This Reporting Period: $_____

Principal Amount Paid This Reporting Period: $_____

Interest Amount Paid This Reporting Period: $_____

Total of All Loans This Reporting Period: $_____
(Place on line 8 of Detailed Summary Report)

Amount Repaid This Reporting Period: $_____
(Amount Repaid is sum of Principal & Interest entered on Detail Summary)

Total Repayments Made: $_____
(Sum of Schedule C pages, Place on line 16 of Detailed Summary)

Outstanding Balance: $_____

TERMS OF LOAN: _____ Date Loan Received _____ Due Date for Final Payment

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, City, State, Zip	Amount Guaranteed

Schedule C Loans
Page 10 of 14
Use additional pages as necessary

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: Committee to Elect Andres Pico

Returned Contributions

(Previously reported on Schedule A – Contributions accepted and then returned to donors)

PLEASE PRINT/TYPE

1. Name (Last, First): N/A
2. Address:
3. City/State/Zip:
4. Purpose:
5. Date Accepted:
6. Date Returned:
7. Amount: $

1. Name (Last, First):
2. Address:
3. City/State/Zip:
4. Purpose:
5. Date Accepted:
6. Date Returned:
7. Amount: $

1. Name (Last, First):
2. Address:
3. City/State/Zip:
4. Purpose:
5. Date Accepted:
6. Date Returned:
7. Amount: $

Schedule D Returned Contributions
Page 11 of 14
Use additional pages as necessary

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Purpose: _____
5. Date Accepted: _____
6. Date Returned: _____
7. Amount: $_____

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Purpose: _____
5. Date Accepted: _____
6. Date Returned: _____
7. Amount: $_____

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Purpose: _____
5. Date Accepted: _____
6. Date Returned: _____
7. Amount: $_____

Schedule D Returned Contributions
Page 12 of 14
Use additional pages as necessary

Returned Expenditures

(Previously reported on Schedule B – Expenditures returned or refunded to the committee)

PLEASE PRINT/TYPE

1. Name (Last, First): N/A
2. Address: _____
3. City/State/Zip: _____
4. Comment (Optional): _____
5. Date Accepted: _____
6. Date Returned: _____
7. Amount: $_____

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Comment (Optional): _____
5. Date Accepted: _____
6. Date Returned: _____
7. Amount: $_____

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Comment (Optional): _____
5. Date Accepted: _____
6. Date Returned: _____
7. Amount: $_____

Schedule D Returned Expenditures
Page 13 of 14
Use additional pages as necessary

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Comment (Optional): _____
5. Date Accepted: _____
6. Date Returned: _____
7. Amount: $_____

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Comment (Optional): _____
5. Date Accepted: _____
6. Date Returned: _____
7. Amount: $_____

1. Name (Last, First): _____
2. Address: _____
3. City/State/Zip: _____
4. Comment (Optional): _____
5. Date Accepted: _____
6. Date Returned: _____
7. Amount: $_____

Schedule D Returned Expenditures
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Use additional pages as necessary