

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Person:	FRIENDS OF	- MC CARVILLE	
	As Shown On Registration		
Address of Committee/Person:	1309 TESLA DR		
City, State & Zip Code:	COLORADO SPRINGS CO 80909		
Committee Type:			
Name and Address of Financial Institution:			
Type of Report ☐ Regularly Scheduled Filing. ☐ Amended Filing. This amends previous re Submit changes or new information ON ☐ Final Filing.	port filed on (date) LY		
Reporting Period Covered: 2-	15-2013 Through	2 - 24 - 2013 Date	
Funds on Hand at the Beginning of Repo	orting Poriod	Totals Detailed Summary Page	
Total Monetary Contributions (line 11)	monetary only)	\$ 596.77	
Total of Monetary Contributions & Beginn	aina Amarintii	\$ 80.00	
Total Spending (line 20)	ing Amount (line I + line 2)	\$ 67677	
	loried ()	\$ 0	
Funds on Hand at the End of Reporting P	'errod' (monetary) (line 3 – line 4)	\$ 076.77	
Authorization (Must be completed by either the declare, under penalty of perjury, that to the best this form, including all schedules, statements, and knowledge or belief all contributions received dur the form of membership dues transferred by a me	of my knowledge or belief the in attachments, are true and corre ing this reporting period includin	nformation or statements on ect, and that to the best of my og any contributions received in	
Print Registered Agent's Name: Robert Mc CARVILLE Registered Agent's Signature: Rogert Mc Carvilleate: 3-1-13 Print Candidate Name: ROBERT MC CARVILLE Candidates Signature: Rogert Mc Carville Date: 3-1-13			
			Print Candidate Name: ROGER 1
Candidates Signature: <u>Mager</u>			
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DETAILED SUMMARY

Full Name of Committee/Person: $\overline{FRIENDS}$ \overline{OF} \overline{MC} $\overline{CARUILLE}$ Current Reporting Period: 2-15-2013 Through: 2-24-2013

Fund	ds on hand at the beginning of reporting period (Monetary Only)	\$ 596,77
6	Itemized Contributions \$20 or More (Please list on Schedule "A")	\$ 80.00
7	Total of Non-Itemized Contributions (\$19.99 or Less) (Number of Contributions of \$19.99 or Less)	\$ 0
8	Loans Received (Please list on Schedule "C")	\$
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ 0
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ 0
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 80.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 0
13	Total Contributions (Line 11 + line 12)	\$ 80,00
14	Itemized Expenditures \$20 or More (Please list on Schedule "B")	\$
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$
16	Loan Repayments Made (Please list on Schedule "C")	\$
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$
18	Closeout Distributions (Balance must be zero. Please attach Schedule E.)	\$
19	(Intentionally left Blank)	\$
20	Total Spending (Lines 14 through 17)	\$ 0

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

Full Name of Committee/Person: TRIENDS OF MC CARUILLE

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

PLEASE PRINT/TYPE	
1. Name (Last, First): YON P. DIDLEAU	
2. Address: 7935 FOREST HEIGHTS CIR	
3. City/State/Zip: BLACK FOREST, CO 80908	
4. Description:	
5. Employer (mandatory if employed): Vetaired	
6. Occupation (mandatory if employed): retained A.F.	
7. Date Accepted: 2/15/2013	
8. Aggregate Amount This Election Cycle:	
9. Contribution Amount This Reporting Period:	\$ 20.00
1. Name (Last, First): Jon P. Didlegy, Jr.	
1. Name (Last, First): Jon P. Didleay, Jr. 2. Address: 7935 Forest Heights Cin	
1. Name (Last, First): Jon P. Didleay, Jr. 2. Address: 7935 Forest Heights Cir. 3. City/State/Zip: Black Forest, Co. 80908	
2. Address: 7935 Forest Heights Cin	
2. Address: 7935 Forest Heights Cin 3. City/State/Zip: Black Forest, Co. 80908	
2. Address: 7935 Forest Heights Cin. 3. City/State/Zip: Black Forest, Co. 80908 4. Description:	
2. Address: 7935 Forest Heights Cir. 3. City/State/Zip: Black Forest, Co. 80908 4. Description: 5. Employer (mandatory if employed): Railroad	
2. Address: 7935 Forest Heights Cir. 3. City/State/Zip: Black Forest, Co. 80908 4. Description: 5. Employer (mandatory if employed): Railroad 6. Occupation (mandatory if employed):	

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

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Use additional pages as necessary

1. Name (Last, First): LEON Oldendahl	
2. Address: 10 Postmaster	
3. City/State/Zip: Woodland Park, Cu,	
4. Description:	
5. Employer (mandatory if employed): retir.	
6. Occupation (mandatory if employed):	
7. Date Accepted: 2-20-13	
8. Aggregate Amount This Election Cycle:	
9. Contribution Amount This Reporting Period:	\$ 4000
1 Name # France	
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:	\$

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