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REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Person:		Colorado Association	of REALTOF	RS- Colorado Springs Political Committe
		As Shown On Regis	tration_	
Address of Committee/Person:		309 Inverness	Way S	
City, State & Zip Code:		Englewood, CO 80112		
Committee Type: Political Committee			-	
Name of Financial Institution:		1st Bank		
Address Of Financial Institution:		PO Box 27077	8	
City, State & Zip Code Financial In	nstitution:	Fort Collins, Co	O 80527	
Type of Report Regularly Scheduled Filing. Amended Filing. This amend Submit changes or new info Final Filing.	s previous re ormation ON	LY		05/02/2013
Reporting Period Covered:	04/01/201	ა Date	Through	Date
Funds on Hand at the Beginnin Total Monetary Contributions (I Total of Monetary Contribution Total Spending (line 20 of Detailed S	ine 11 of Deta ns & Beginn ummary)	iled Summary) ning Amount (line 1	+ line 2)	Totals Detailed Summary Po \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
Funds on Hand at the End of R	eporting P	eriod (monetary) (tin	e 3 – line 4)	\$ 0.00
Authorization (Must be complete declare, under penalty of perjury, that this form, including all schedules, state knowledge or belief all contributions of the form of membership dues transfer	it to the best ements, and eceived dun red by a me	of my knowledge or attachments, are tru ing this reporting per mbership organizatio	belief the in the and correction including the bare from	nformation or staternents on ect, and that to the best of my g any contributions received in permissible sources.
Print Registered Agent's Name Registered Agent's Signature:	Re	James		Date: 5/1/13
Print Candidate Name:				
Candidates Signature:				Oate:
	o Springs			

DETAILED SUMMARY

	COIDI BUD ASSOCIATION OF MEMELOWS.	Colorado Opringo Fondical Col	Hillinger
full Name of Committee/Person:			

Current Reporting Period: 04/01/2013 Through: 05/02/2013

Fund	s on hand at the beginning of reporting period (Monetary Only)	\$ 0.00
6	Itemized Monetary Contributions \$20 or More (Please list on Schedule "A-1")	\$ 0.00
7	Total of Non-Itemized Contributions (\$19.99 or Less) (Number of Contributions of \$19.99 or Less	\$ 0.00
8	Loans Received (Please list on Schedule "C")	\$ 0.00
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ 0.00
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ 0.00
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 0.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions Schedule "A-2")	\$ 0.00
13	Total Contributions (Line 11 + line 12)	\$ 0.00
14	Itemized Expenditures \$20 or More (Please list on Schedule "B")	\$ 0.00
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 0.00
16	Loan Repayments Made (Please list on Schedule "C")	\$ 0.00
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ 0.00
18	Closeout Distributions (Balance must be zero. Please attach Schedule E.)	\$ 0.00
19	(Intentionally left Blank)	\$
20	Total Spending (Lines 14 through 17)	\$ 0.00

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

Full Name of Committee/Person:

Colorado Association of REALTORS- Colorado Springs Political Committee

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

PLEASE PRINT/TYPE	
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:	
Aggregate Amount This Election Cycle:	
9. Contribution Amount This Reporting Period:	\$

Schedule A-1 Itemized Contributions Statement (\$20 or more)
Page _____ of ____
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 ____ of ___ Use additional pages as necessary

Schedule A-2 - Statement of Non-Monetary Contributions

Full Name of Committee/Person: Colorado Association of REALTORS- Colorado Springs Political Committee

PLEASE PRINT/TYPE	
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:	\$
7.1 dii Market Valoe.	
Name (Last, First):	
1. Name (Last, First):	
Name (Last, First): Address:	
1. Name (Last, First): 2. Address: 3. City/State/Zip:	
1. Name (Last, First): 2. Address: 3. City/State/Zip: 4. Description:	
1. Name (Last, First): 2. Address: 3. City/State/Zip: 4. Description: 5. Employer (mandatory if employed):	
1. Name (Last, First): 2. Address: 3. City/State/Zip: 4. Description: 5. Employer (mandatory if employed): 6. Occupation (mandatory if employed):	

Schedule A-2 Statement of Non-Monetary Contributions (\$20 or more) Page ____ of _

Address:
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 _____ of ____ Use additional pages as necessary

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

Full Name of Committee/Person: Colorado Association of REALTORS- Colorado Springs Polítical Committee PLEASE PRINT/TYPE 3. City/State/Zip: _____ 4. Purpose of Expenditure: _____ 5. Date Expended: _____ 6. Amount: 1. Name (Last, First): 2. Address: ______ 4. Purpose of Expenditure: 5. Date Expended: ______ 6. Amount: 1. Name (Last, First): 2. Address: 3. City/State/Zip: _____ 4. Purpose of Expenditure: 5. Date Expended: _____

Schedule B Itemized Expenditures Statement (\$20 or more)
Page _____ of ____
Use additional pages as necessary

6. Amount:

1. Name (Last, First):	
2. Address:	-
3. City/State/Zip:	
4. Purpose of Expenditure:	
5. Date Expended:	
6. Amount:	<u>\$</u>
1. Name (Last, First):	
2. Address:	
3. City/State/Zip:	-
4. Purpose of Expenditure:	
5. Date Expended:	-
6. Amount:	\$
1. Name (Last, First):	
2. Address:	_
3. City/State/Zip:	-
4. Purpose of Expenditure:	-
5. Date Expended:	-
6. Amount:	\$

Schedule B Itemized Expenditures Statement (\$20 or more)
Page _____ of ____
Use additional pages as necessary

	chedule C - L	oans	
Full Name of Committee/Person: Colorad	lo Association of REAL*	ORS- Colorado Springs Political Committee	
LOAN SOURCE			
Name (Last, First or Institution):			
Address:			
City/State/Zip:			_
Original Amount of Loan: \$		Interest Rate:	%
Loan Amount Received This Reporting Period:	\$	Total of All Loans This Reporting Period: \$ (Place on line 8 of Detailed Summary)	Report)
Principal Amount Paid This Reporting Period:	\$,	
Interest Amount Paid This Reporting Period:	\$		
Amount Repaid This Reporting Period: (Amount Repaid is sum of Principal & Interest entered on Det	•		n line 16 of
Outstanding Balance:	\$	•	7.7
TERMS OF LOAN:	Date Loan Re	ceived Due Date for Final Payment	

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, Clty, State, Zip	Amount Guaranteed

Schedule C Loans
Page ____ of ___
Use additional pages as necessary

	LOAN SOURCE				
	Name (Last, First or Institution)):			
	Address:				
	City/State/Zip:				
	Original Amount of Loan: \$_			Interest Ra	ıte: %
Loan A	mount Received This Reporting F	Period:	\$		All Loans This Reporting Period: \$ Tine 8 of Detailed Summary Report)
Princip	al Amount Paid This Reporting Pe	eriod:	\$	(1.100001.)	Time of a Baranag commer i Roperti
interes	t Amount Paid This Reporting Peri	iod:	\$		
	nt Repaid This Reporting Period: t Repaid is sum of Principal & Interest ento		il Summary)		ayments Made: \$ f Schedule C pages, Place on line 16 of Detailed Summary)
	Outstanding Balo	ance:	\$		
	TERMS OF LOAN:		Date Loan Rec	eived Due	Date for Final Payment
	LIST ALL E	NDORSER:	S OR GUARAN	ITORS OF THIS	LOAN
	Full Name	Add	dress, City, Sto	rte, Zip_	Amount Guaranteed

 , talai 600, 6 ii / , 6 i a i 6 j a i 6	

Schedule C Loans Page ____ of ___ Use additional pages as necessary

Rev. • • • • • • • • • •

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: Colorado Association of REALTORS- Colorado Springs Political Committee

Returned Contributions

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

PLEASE PRINT/TYPE	
Name (Last, First):	_
2. Address:	
3. City/State/Zip:	-
4. Purpose:	_
5. Date Accepted:	_
6. Date Returned:	-
7. Amount:	<u> </u>
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 ____ of _ 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 _____ of ____ 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):	_
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 ____ of _ 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:	<u> </u>
1. Name (Last, First):	
2. Address:	
3. City/State/Zip:	-
4. Comment (Optional):	-
5. Date Accepted:	_
6. Date Returned:	_
7. Amounț:	<u> </u>
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 _____ of ____ Use additional pages as necessary

Schedule E - Closeout Distributions

(To be completed after the election is certified. Complete the Delafled Summary before completing this Schedule E)

1	Funds on Hand at the Beginning of Reporting Period (from detailed summary, monetary only)		\$0.00	
2	Total Monetary Contributions for the Reporting Period (detailed summary, line 11)		\$0.00	
3	3 Total Funds (line 1 + line 2)		\$ 0.00	
	Expenditures During the Reporting Period:			
	а	Itemized Expenditures \$20 or More (From detailed summary line 14)	\$0.00	
4	р	Total of Non-Itemized Expenditures (From detailed summary line 15)	\$0.00	
	С	Loan Repayments Made (From detailed summary line 16)	\$0.00	
	d	Returned Contributions (To donor) (From detailed summary line 17)	\$0.00	
	Total Expenditures (total of a, b, c, and d)		\$0.00	
5	Total Contributions to Charitable organizations (attach list showing the Name, Address, and amount contributed to each Charitable organization)		_{\$} 0.00	
6	Funds retained for a future election (list financial institution in which the funds will remain)		\$0.00	
7	Total of lines 4, 5, and 6		\$0.00	
8	Subtract line 7 from line 3 (Result must be zero) and enter on line 18 of the detailed Summary		\$0.00	

Schedule E Closeout Distributions