CITY OF COLORADO SPRINGS

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of ~~Committee~~/Person:	ED BIRCHAM

As Shown On Registration

Address of ~~Committee~~/Person:	5224 MIRANDA RD
City, State & Zip Code:	COLORADO SPRINGS. CO. 80918
Committee Type:	N/A
Name and Address of Financial Institution:	WELLS FARGO. 4151 N. ACADEMY BLVD COLORADO SPRINGS. CO. 80918

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: 2-11-13 (Date) **Through** 2-23-13 (Date)

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	$ 3,246.08
2	Total Monetary Contributions (line 11)	$ -0-
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	$ 3,246.08
4	Total Spending (line 20)	$ 96.00
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 – line 4)	$ 3,150.08

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: N/A

Registered Agent's Signature: N/A Date: —

Print Candidate Name: ED BIRCHAM

Candidates Signature: Edward G. Bircham Date: 2-27-13

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CITY CLERK'S OFFICE

DETAILED SUMMARY

Full Name of ~~Committee~~/Person: ED BIRCHAM

Current Reporting Period: 2-11-13 **Through:** 2-23-13

Funds on hand at the beginning of reporting period (Monetary Only)		$ 3,246.08
6	**Itemized Contributions $20 or More** (Please list on Schedule "A")	$ —0—
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")	$ —0—
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)	$ —0—
12	**Total Non-Monetary Contributions** (From Statement of Non-Monetary Contributions)	$ —0—
13	**Total Contributions** (Line 11 + line 12)	$ —0—
14	**Itemized Expenditures $20 or More** (Please list on Schedule "B")	$ 90.00
15	**Total of Non-Itemized Expenditures** (Expenditures of $19.99 or Less)	$ 6.00
16	**Loan Repayments Made** (Please list on Schedule "C")	$ —0—
17	**Returned Contributions (To donor)** (Please list on Schedule "D")	$ —0—
18	**Closeout Distributions** (Balance must be zero. Please attach Schedule E.)	$ —0—
19	**(Intentionally left Blank)**	$
20	**Total Spending** (Lines 14 through 17)	$ 96.00

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

Full Name of ~~Committee~~/Person: ED BIRCHAM

PLEASE PRINT/TYPE

1. Name: CITY OF COLORADO SPRINGS
2. Address: 30, S. NEVADA AVE
3. City/State/Zip: COLORADO SPRINGS. CO. 80903
4. Purpose of Expenditure: REVOCABLE PERMIT
5. Date Expended: 2-13-13
6. Amount: #40 (CH #99) $ 40 00

1. Name: MARK FENIZ
2. Address: 4507 N. CAREFREE CIRCLE
3. City/State/Zip: COLORADO SPRINGS. CO. 80917
4. Purpose of Expenditure: I.T AND CLERICAL WORK.
5. Date Expended: 2-15-13
6. Amount: # 50 00 $ 50. 00

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 1 of 1
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 _____ of _____
Use additional pages as necessary