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REPORT OF CONTRIBUTIONS AND EXPENDITURES

F	ull Name of Committee/Person:	COMMITTEE	TO EL	ECT DAVID H. MOORE	
<u> </u>		As Shown On Regist	ration		
Α	ddress of Committee/Person:	4130 HEATHM		2	
С	ity, State & Zip Code:	COS, CO. 8092	22		
С	committee Type:	CANDIDATE			
N	ame of Financial Institution:	1ST BANK			
Α	ddress Of Financial Institution:	1275 GARDEN	OF THE	GODS	
С	ity, State & Zip Code Financial Institution:	COS, CO. 8090	07		
	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: 03/29/2013	3	Through	05/01/2013	
lea	ase complete applicable schedules price Funds on Hand at the Beginning of Repo			Totals Detailed Summary Page	
2	Total Monetary Contributions (line 11 of Detail		idiy oriiy)	\$ 1,387.03 \$ 0.00	
3	Total of Monetary Contributions & Beginn		+ line 2)	\$ 1,387.03	
1	Total Spending (line 20 of Detailed Summary)		,	\$ 1,387.03	
5	Funds on Hand at the End of Reporting P	eriod (monetary) (line	e 3 – line 4)	\$ 0.00	
	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:		г	Jate:	
	Registered Agent's Signature: Date: Print Candidate Name: DAVID H MOORE		Juic		
	Candidates Signature: DAVID H M	OORE	D	ate:	

DETAILED SUMMARY

Full Name of Committee/Person: COMMITTEE TO ELECT DAVID H. MOORE

Current Reporting Period: 03/29/2013 **Through:** 05/01/2013

Fund	s on hand at the beginning of reporting period (Monetary Only)	\$ 1,387.03
6	Itemized A cbYtUfy 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")	\$
9	Total of Other Receipts (Interest, Dividends, etc.)	\$
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$
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")	\$ 1,376.53
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 10.50
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.)	\$ 0.00
19	(Intentionally left Blank)	\$
20	Total Spending (Lines 14 through 17)	\$ 1,387.03

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

Full Name of Committee/Person: COMMITTEE TO ELECT DAVID H. MOORE

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:	
Q. A garagata Apacupt This Flaction Cycles	
8. Aggregate Amount This Election Cycle:	

Schedule A-1 Itemized Contributions Statement (\$20 or more) Page <u>1</u> of <u>4</u>
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 1	
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 $\underline{2}$ of $\underline{4}$ Use additional pages as necessary

Schedule A-2 - Statement of Non-Monetary Contributions

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:	\$
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:	
7. Date Provided: 8. Aggregate Amount:	

Schedule A-2 Statement of Non-Monetary Contributions (\$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 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: COMMITTEE TO ELECT DAVID H. MOORE

PLEASE PRINT/TYPE	
1. Name (Last, First): CHRISTIAN RECOVERY HOME	
2. Address: 2818 N NEVADA	
3. City/State/Zip: COS, CO. 80907	
4. Purpose of Expenditure: SOCIAL MEDIA/SIGNS	
5. Date Expended: <u>04/01/2013</u>	
6. Amount:	_{\$} 688.00
1. Name (Last, First): MICAH WILL	
2. Address: 2360 SKY VIEW LN	
3. City/State/Zip: COS, CO. 80904	
4. Purpose of Expenditure: ST PATRICK DAY PARADE	
5. Date Expended: <u>04/03/2013</u>	
6. Amount:	_{\$} 125.00
1. Name (Last, First): OLD CHICAGO	
2. Address: 118 NORTH TEJON	
3. City/State/Zip: COS, CO. 80903	
4. Purpose of Expenditure: ELECTION NIGHT DINNER	
5. Date Expended: 04/04/2013	
6. Amount:	_{\$_} 99.86

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

1. Name (Last, First): COS PUBLIC LIBRARY	
2. Address: 5550 UNION BLVD	
3. City/State/7ip: COS, CO. 80917	
4. Purpose of Expenditure: FUND RAISER	
5. Date Expended: 04/05/2013	
6. Amount:	_{\$} 50.00
1. Name (Last, First): ANTHONY WILLIAMS	
2. Address: 1340 HOLLOW ROCK DR	
3. City/State/Zip: COS, CO. 80911	
4. Purpose of Expenditure: SIGN PICK UP	
5. Date Expended: 04/10/2013	
6. Amount:	_{\$} 200.00
1. Name (Last, First): MICAH WILL	
2. Address: 2360 SKY VIEW LN	
3. City/State/Zip: COS, CO. 80904	
4. Purpose of Expenditure: CAMPAIGN MANAGER	
5. Date Expended: 04/25/2013	
6. Amount:	_{\$} 213.67

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

Schedule C - Loans

Full Name of Committee/Person: COMMITTEE TO ELECT DAVID H. MOORE

Name (Last, First or Institution):	

Address:

City/State/Zip: _____

Original Amount of Loan: \$_____ Interest Rate: _____ %

Loan Amount Received This Reporting Period: \$_____ Period: \$____ (Place on line 8 of Detailed Summary Report)

Principal Amount Paid This Reporting Period: \$_____

LOAN SOURCE

Interest Amount Paid This Reporting Period: \$_____

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

Total of All Loans This Reporting

Rev. \$&#\$, #&\$%

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, City, State, Zip	Amount Guaranteed

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

Full Name of Committee/Person: COM	Full Name of Committee/Person: COMMITTEE TO ELECT DAVID H. MOORE		
LOAN SOURCE			
Name (Last, First or Institution):			
Address:			
City/State/Zip:			
Original Amount of Loan: \$		Interest Rate:	<u>%</u>
Loan Amount Received This Reporting Period:	\$	Total of All Loans This Re Period: \$ (Place on line 8 of Detailed S	
Principal Amount Paid This Reporting Period:	\$	— (Flace of fille of of Defailed 3	оппату керопј
Interest Amount Paid This Reporting Period:	\$	_	
Amount Repaid This Reporting Period: (Amount Repaid is sum of Principal & Interest entered on Deta	\$ ail Summary)	(Sum of Schedule C pages	
Outstanding Balance:	\$		sommary
TERMS OF LOAN:	Date Loan Re	Peceived Due Date for Final Paym	ent
IIST ALL TRANSPORSER	S OR GUARA	ANTORS OF THIS LOAN	

Full Name	Address, City, State, Zip	Amount Guaranteed

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

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: COMMITTEE TO ELECT DAVID H. MOORE

Returned Contributions

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

PLEASE PRINT/TYPE	
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	

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Rev. \$&#\$, #&\$%

Use additional pages as necessary

Office of the City Clerk – City of Colorado Springs

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:	\$
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

Schedule E - Closeout Distributions

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

1	Funds on Hand at the Beginning of Reporting Period (from detailed summary, monetary only)			\$
2	Total Monetary Contributions for the Reporting Period (detailed summary, line 11)		\$	
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)	\$	
	b	Total of Non-Itemized Expenditures (From	\$	
4		detailed summary line 15)	Ψ	
	С	Loan Repayments Made (From detailed summary line 16)	\$	
	d	Returned Contributions (To donor) (From detailed summary line 17)	\$	
	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)		\$	
6	Funds retained for a future election (list financial institution in which the funds will remain)		\$	
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