

REPORT OF CONTRIBUTIONS AND EXPENDITURES

	Collins for Counc	cil
	As Shown On Registration	78 7
Address of Committee/Person:	632 Lakewood Circle	
City, State & Zip Code:	Colorado Springs, Co	
Committee Type:	Candidate	2
Name of Financial Institution:	ENT	20
Address Of Financial Institution:	Box 15819	J J
City, State & Zip Code Financial Institution	n: Colorado Springs, Co	
Type of Report Regularly Scheduled Filing. Amended Filing. This amends previous Submit changes or new information Final Filing.	ONLY	01/27/2015
Reporting Period Covered: 04/26/2	Date Throug	ph Date
Funds on Hand at the Beginning of Re Total Monetary Contributions (line 1) of D	eporting Period (monetary only)	Totals Detailed Summary Page \$ 541.48
Total Monetary Contributions (line 11 of D		\$ 963.46
Total of Monetary Contributions & Beg	JINNING AMOUNT (line 1 + line 2)	\$ 1,504.94
T-1-10		
Total Spending (line 20 of Detailed Summary)		\$ 295.00
	g Period (monetary) (line 3 - line 4	·
	er the Registered Agent OR the Co pest of my knowledge or belief the and attachments, are true and co during this reporting period includ	\$ 1,209.94 andidate): I hereby certify and enformation or statements on the best of my ling any contributions received in
Authorization (Must be completed by either declare, under penalty of perjury, that to the bettis form, including all schedules, statements, a knowledge or belief all contributions received	er the Registered Agent OR the Copest of my knowledge or belief the and cope attachments, are true and cope during this reporting period including membership organization are from	\$ 1,209.94 andidate]: I hereby certify and enformation or statements on a meet, and that to the best of my ling any contributions received in a permissible sources.
Authorization (Must be completed by either declare, under penalty of perjury, that to the bethis form, including all schedules, statements, a knowledge or belief all contributions received the form of membership dues transferred by a Print Registered Agent's Name: Registered Agent's Signature:	er the Registered Agent OR the Conest of my knowledge or belief the and and the condition of the condition	\$ 1,209.94 andidate]: I hereby certify and enformation or statements on the statements of my ling any contributions received in magnetic permissible sources. Date:
Authorization (Must be completed by either declare, under penalty of perjury, that to the betthis form, including all schedules, statements, a knowledge or belief all contributions received the form of membership dues transferred by a Print Registered Agent's Name:	er the Registered Agent OR the Conest of my knowledge or belief the and and the condition of the condition	\$ 1,209.94 andidate]: I hereby certify and enformation or statements on the statements of my ling any contributions received in magnetic permissible sources. Date:

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Office of the City Clerk – City of Colorado Springs

Rev. 1301903124

DETAILED SUMMARY

Full Name of Committee/Person: Collins for Council

Current Reporting Period: 04/26/2014 Through: 01/27/2015

Fund	s on hand at the beginning of reporting period (Monetary Only)	\$ ^{541.48}
6	Itemized Monetary Contributions \$20 or More (Please list on Schedule "A-1")	\$895.00
7	Total of Non-Itemized Contributions (\$19.99 or Less) (Number of Contributions of \$19.99 or Less 3	\$43.00
8	Loans Received (Please list on Schedule "C")	\$
9	Total of Other Receipts (Interest, Dividends, etc.)	\$25.46
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$
11	Total Monetary Contributions (Total of lines 6 through 10)	\$963.46
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions Schedule "A-2")	\$0.00
13	Total Contributions (Line 11 + line 12)	\$0.00 963.46
14	Itemized Expenditures \$20 or More (Please list on Schedule "B")	\$295.00
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)	\$295.00

1. Name (Last, First): Brewer, Marsha	
2. Address: 2440 Edison Rd.	_
3. City/State/Zip: Yoder, CO 80864	
4. Description: Donation	_
5. Employer (mandatory if employed): Retired	
6. Occupation (mandatory if employed):	
7. Date Accepted:	
8. Aggregate Amount This Election Cycle:	
9. Contribution Amount This Reporting Period:	_{\$} 25.00
1. Name (Last, First): Minister, Cornelia	
2. Address: 331 Morningside Dr.	
3. City/State/Zip: Colorado Springs, CO 80901	
4. Description: Donation	
5. Employer (mandatory if employed): Retired	
6. Occupation (mandatory if employed):	
7. Date Accepted: 01/19/2015	
8. Aggregate Amount This Election Cycle:	
9. Contribution Amount This Reporting Period:	_{\$} 50.00
1. Name (Last, First): Sharon, Jean	
2. Address: 101 S 7th Street	
3. City/State/Zip: Colorado Springs, CO 80905	
4. Description: Donation	
5. Employer (mandatory if employed): Old Town Gallery	
6. Occupation (mandatory if employed): Owner	
7. Date Accepted: 01/19/2015	
8. Aggregate Amount This Election Cycle:	
9. Contribution Amount This Reporting Period:	_{\$} 20.00

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

Full Name of Committee/Person: Collins for Council

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

PLEASE PRINT/TYPE	
1. Name (Last, First): Sweet, Albert	
2. Address: 1030 Crandall Dr	
3. City/State/Zip: Security, CO 80911	
4. Description: Donation	
5. Employer (mandatory if employed): Ft. Carson Commissary	
6. Occupation (mandatory if employed): Store Associate	_
7. Date Accepted: 01/16/2015	
8. Aggregate Amount This Election Cycle:	
9. Contribution Amount This Reporting Period:	\$ <u>50.00</u>

1. Name (Last, First): Ehlers, Charlie	
2. Address: 575 Calle Entrada	
3. City/State/Zip: Fountain, CO 80817	
4. Description: Donation	
5. Employer (mandatory if employed): Retired	
6. Occupation (mandatory if employed):	
7. Date Accepted: 01/16/2015	
8. Aggregate Amount This Election Cycle:	
9. Contribution Amount This Reporting Period:	_{\$} 50.00

Schedule A-1 Itemized Contributions Statement (\$20 or more) Page $_$ 3 of $_$ 4 Use additional pages as necessary

Schedule A-1 - Itemized Contributions Statement (\$20 or More) Full Name of Committee/Person: WARNING: Please read the instruction page for Schedule "A" before completing! PLEASE PRINT/TYPE 1. Name (Last, First): Schultheis, David and Sandra 2. Address: 1250 Golden Hills Rd. 3. City/State/Zip: Colorado Springs, CO 80919 4. Description: Donation 5. Employer (mandatory if employed): Retired 6. Occupation (mandatory if employed): 7. Date Accepted: 01/17/2015 8. Aggregate Amount This Election Cycle: _____ \$500.00 9. Contribution Amount This Reporting Period: 1. Name (Last, First): Eichler, Kenneth 2. Address: 1719 Armstrong Avenue 3. City/State/Zip: Colorado Springs, CO 80904 4. Description: Donation 5. Employer (mandatory if employed): Self-Employed 6. Occupation (mandatory if employed): Handyman 7. Date Accepted: 01/18/2015 Aggregate Amount This Election Cycle: ______ \$50.00 9. Contribution Amount This Reporting Period:

Schedule A-1 - Itemized Contributions Statement (\$20 or More) Full Name of Committee/Person: WARNING: Please read the instruction page for Schedule "A" before completing! PLEASE PRINT/TYPE 1. Name (Last, First): Corbin, Amy Lee 2. Address: 1904 Snyder Avenue 3. City/State/Zip: Colorado Springs, CO 80909 4. Description: Donation 5. Employer (mandatory if employed): Retired 6. Occupation (mandatory if employed): 7. Date Accepted: 01/21/2015 8. Aggregate Amount This Election Cycle: _____ \$50.00 9. Contribution Amount This Reporting Period: 1. Name (Last, First): Knight, Don 2. Address: 435 Guyout Ridge CT. 3. City/State/Zip: Colorado Springs, CO 80919 4. Description: Donation 5. Employer (mandatory if employed): Self-Employed 6. Occupation (mandatory if employed): Handyman 7. Date Accepted: 01/26/2015 8. Aggregate Amount This Election Cycle: \$ 100.00 9. Contribution Amount This Reporting Period:

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

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

Full Name of Committee/Person: Collins for Council	
PLEASE PRINT/TYPE	
1. Name (Last, First): Patriot Signage, Inc.	
2. Address: 1001 Second Avenue	
3. City/State/Zip: Dayton, KY	
4. Purpose of Expenditure: Sign Wires	
5. Date Expended: 01/16/2015	
6. Amount:	_{\$} 240.00
1. Name (Last, First): El Paso Cty Clerk/Recorder	
1675 Garden of the Gods Rd.	
3. City/State/Zip: Colorado Springs, CO 80907	
4. Purpose of Expenditure: Voter Disk	
5. Date Expended: 01/16/2015	
6. Amount:	_{\$} 28.75
1. Name (Last, First): El Paso Cty Clerk/Recorder	
2. Address: 1675 Garden of the Gods Rd.	
3. City/State/Zip: Colorado Springs, CO 80907	
4. Purpose of Expenditure: Voter Disk	
5. Date Expended: 01/20/2015	
6. Amount:	_{\$} 26.26

Schedule B Itemized Expenditures Statement (\$20 or more) Page 1 of 1 Use additional pages as necessary

Schedule C - Loans	
Full Name of Committee/Person: Collins for Council	
LOAN SOURCE	
Name (Last, First or Institution): Collins, Helen	
Address: 632 Lakewood Circle	
City/State/Zip: Colorado Springs, CO 80910	
Original Amount of Loan: \$6,571.50 Interest Rate:	%
Loan Amount Received This Reporting Period: \$6,571.5 Total of All Loans This Reporting Period: Period: \$	
Principal Amount Paid This Reporting Period:	
Interest Amount Paid This Reporting Period: $\$0.00$	
Amount Repaid This Reporting Period: (Amount Repaid is sum of Principal & Interest entered on Detail Summary) Outstanding Balance: TERMS OF LOAN: Total Repayments Made: (Sum of Schedule C pages, Detailed Sum of Schedule C pages) Detailed Sum of Schedule C pages, Detailed Schedule C	Place on line 16 of

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