

## REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Person:	Colorado Springs Government Watch - IC
	As Shown on Registration
Address of Committee/Person	
City, State & Zip Code:	
Committee Type:	Issue
Name of Financial Institution:	Central Bank & Trust
Address of Financial Institution	1 S Nevada Ave #200
City, State & Zip Code of Financial Institution	Colorado Springs, CO, 80903
Type of Request  Regularly Scheduled Filing.  Amended Filing. This amends previous reportant changes or new information ON Final Filing.	` ' <b> </b>
Reporting Period Covered:	02/11/2015 <b>Through</b> 03/02/2015
Date	Date
Date  Please complete applicable schedules prior to compl	ompleting the information in the following table.
Please complete applicable schedules prior to co	ompleting the information in the following table.  Totals Detailed Summary Page
Please complete applicable schedules prior to continuous complete applicable schedules prior to continuous con	ompleting the information in the following table.  Totals Detailed Summary Page g Period (monetary only) \$0.00
Please complete applicable schedules prior to co	ompleting the information in the following table.  Totals Detailed Summary Page g Period (monetary only) \$0.00 ailed Summary) \$0.00
Please complete applicable schedules prior to contributions (line 11 of Details)  Please complete applicable schedules prior to contributions (line 11 of Details)	ompleting the information in the following table.  Totals Detailed Summary Page g Period (monetary only) siled Summary)  Amount (line 1 + line 2)  \$0.00
Please complete applicable schedules prior to complete ap	Totals Detailed Summary Page  g Period (monetary only)  siled Summary)  Amount (line 1 + line 2)  \$0.00
Please complete applicable schedules prior to contributions.  Total Monetary Contributions (line 11 of Details)  Total of Monetary Contributions & Beginning.  Total Spending (line 20 of Detailed Summary.  Funds on Hand at the End of Reporting Period.  Authorization (Must be completed by either the Regist I hereby certify and declare, under penalty of perjury, that to including all schedules, statements, and attachments, are the received during this reporting period including any contribution organization are from permissible sources.  Print Registered Agent's Name: Denise Lauge: Registered Agent's Signature: (Submitted Elections)	Totals Detailed Summary Page g Period (monetary only) siled Summary) Amount (line 1 + line 2) solution (monetary) (line 3 - line 4) stered Agent OR the Candidate): the best of my knowledge or belief the information or statements on this form, we and correct, and that to the best of my knowledge or belief all contributions ions received in the form of membership dues transferred by a membership sen

## **Detailed Summary**

Full Name of Committee/Person:

Colorado Springs Government Watch - IC

**Current Reporting Period:** 

02/11/2015 **Through** 

03/02/2015

Funds on hand at the beginning of reporting period (Monetary Only)		\$0.00
6	Itemized Monetary Contributions \$20 or More	\$0.00
7	Total of Non-Itemized Contributions (\$19.99 or Less)	\$0.00
	(Number of Contributions of \$19.99 or Less: 0)	
8	Loans Received	\$0.00
	(Please list on Schedule "C")	
9	Total of Other Receipts	\$0.00
	(Interest, Dividends, etc.)	
10	Returned Expenditures (from recipient)	\$0.00
	(Please list on Schedule "D")	
11	Total Monetary Contributions	\$0.00
	(Total of lines 6 through 10)	
12	Total Non-Monetary Contributions	\$0.00
	(From Statement of Non-Monetary Contributions Schedule "A-2")	
13	Total Contributions	\$0.00
	(Line 11 + Line 12)	
14	Itemized Expenditures \$20 or More	\$0.00
	(Please list on Schedule "B")	
15	Total of Non-Itemized Expenditures	\$0.00
	(Expenditures of \$19.99 or Less)	
16	Loan Repayments Made	\$0.00
	(Please List on Schedule "C")	
17	Returned Contributions (To donor)	\$0.00
	(Please list on Schedule "D")	
18	Closeout Distributions	\$0.00
	(Balance must be zero. Please attach Schedule E.)	
19	(Intentionally Left Blank)	
20	Total Spending	\$0.00
	(Lines 14 through 17)	