

## REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Perso	on:	Glenn Carlson		
		As Shown on Registi	ation	
Address of Committee/Person		8045 Chancellor Dr		
City, State & Zip Code:		Colorado Springs, CO, 80920		
Committee Type:				
Name of Financial Institution:	Ent Federal Credit Union			
Address of Financial Institution		7250 Campus Drive		
City, State & Zip Code of Financial Institution		Colorado Springs	, CO, 80	920
	g. ends previous report filed on ( new information ONLY 02/25/ Date			03/16/2015 ate
Please complete applicable sche	edules prior to completing	g the information ir		owing table. Is Detailed Summary Page
1 Funds on Hand at the Beginning of Reporting Period (monetary only)				\$989.39
2 Total Monetary Contributions (line 11 of Detailed Summary)				
2 Total Monetary Contributions				\$255.00
<ol> <li>Total Monetary Contributions</li> <li>Total of Monetary Contribution</li> </ol>	(line 11 of Detailed Sum	imary)		\$255.00 \$1,244.39
	(line 11 of Detailed Sum ns & Beginning Amount	imary)		
3 Total of Monetary Contributio	(line 11 of Detailed Sum ns & Beginning Amount tailed Summary)	(line 1 + line 2)	)	\$1,244.39
3       Total of Monetary Contribution         4       Total Spending (line 20 of De         5       Funds on Hand at the End of         5       Funds on Hand at the End of         Authorization       (Must be completed         I hereby certify and declare, under penal including all schedules, statements, and received during this reporting period incluorganization are from permissible source         Print Registered Agent's Name:	(line 11 of Detailed Sum ns & Beginning Amount tailed Summary) Reporting Period (mone d by either the Registered Age ty of perjury, that to the best of attachments, are true and corr uding any contributions receive es. Glenn Carlson	(line 1 + line 2) (line 1 + line 2) tary) (line 3 - line 4 nt OR the Candidate): f my knowledge or belie ect, and that to the bes ed in the form of membe	f the inform t of my kno ership dues	\$1,244.39 \$681.27 \$563.12 nation or statements on this form, owledge or belief all contributions s transferred by a membership
3       Total of Monetary Contribution         4       Total Spending (line 20 of De         5       Funds on Hand at the End of         5       Funds on Hand at the End of         Authorization       (Must be completed         I hereby certify and declare, under penal         including all schedules, statements, and         received during this reporting period inclu         organization are from permissible source         Print Registered Agent's Name:         Registered Agent's Signature:	(line 11 of Detailed Sum ns & Beginning Amount tailed Summary) Reporting Period (mone d by either the Registered Agen ty of perjury, that to the best of attachments, are true and corr uding any contributions receive es. Glenn Carlson (Submitted Electronica	(line 1 + line 2) (line 1 + line 2) tary) (line 3 - line 4 nt OR the Candidate): f my knowledge or belie ect, and that to the bes ed in the form of membe	f the inform	\$1,244.39 \$681.27 \$563.12 nation or statements on this form, owledge or belief all contributions
3       Total of Monetary Contribution         4       Total Spending (line 20 of De         5       Funds on Hand at the End of         5       Funds on Hand at the End of         Authorization       (Must be completed         I hereby certify and declare, under penal including all schedules, statements, and received during this reporting period incluorganization are from permissible source         Print Registered Agent's Name:	(line 11 of Detailed Sum ns & Beginning Amount tailed Summary) Reporting Period (mone d by either the Registered Age ty of perjury, that to the best of attachments, are true and corr uding any contributions receive es. Glenn Carlson	Imary) (line 1 + line 2) tary) (line 3 - line 4 at OR the Candidate): f my knowledge or belie ect, and that to the bes ad in the form of member Ily)	f the inform t of my kno ership dues	\$1,244.39 \$681.27 \$563.12 nation or statements on this form, owledge or belief all contributions s transferred by a membership

	Γ	Detailed Summary		
Full Nam	L ne of Committee/Person			
	Reporting Period:	02/25/2015 Through	03/16/2015	
		of reporting period (Monetary Only)	\$989.39	
6		ary Contributions \$20 or More	\$255.00	
7	Total of Non-Itemiz	ed Contributions (\$19.99 or Less)	\$0.00	
	(Number of Cor	ntributions of \$19.99 or Less: 0)		
8	I	Loans Received	\$0.00	
(		ase list on Schedule "C")		
9 To		I of Other Receipts	\$0.00	
		terest, Dividends, etc.)		
10	Returned Ex	penditures (from recipient)	\$0.00	
	(Ple;	ase list on Schedule "D")		
11	Total M	onetary Contributions	\$255.00	
	(Tota	al of lines 6 through 10)		
12	Total Non	-Monetary Contributions	\$0.00	
	(From Statement of No	on-Monetary Contributions Schedule "A-2")		
13	Тс	otal Contributions	\$255.00	
		(Line 11 + Line 12)		
14	Itemized E	Expenditures \$20 or More	\$681.27	
	(Ple:	ase list on Schedule "B")		
15	Total of No	on-Itemized Expenditures	\$0.00	
	(Exper	nditures of \$19.99 or Less)		
16		n Repayments Made	\$0.00	
	(Plea	ase List on Schedule "C")		
17	Returned	Contributions (To donor)	\$0.00	
	(Pleas			
18	Clos	\$0.00		
	(Balance must b	be zero. Please attach Schedule E.)		
19	(Inte	ntionally Left Blank)		
20		Total Spending	\$681.27	
	(			

Schedule A -1 - Itemized Contributions Statement (\$20 or More)							
Full Name of Committee/Person:       Glenn Carlson         WARNING: Please read the instruction page for Schedule "A" before completing!         Please Print/Type							
						1. Name (Last, First):	Carlson, Dolores
						2. Address:	7115 Trails End Court
3. City/State/Zip:	Colorado Springs, CO, 80911						
4. Description:	check						
5. Employer (mandatory if employed):	retired						
6. Occupation (mandatory if employed):	retired						
7. Date Accepted:	03/03/2015						
8. Aggregate Amount this Election Cycle:	\$70.00						
9. Contribution Amount this Reporting Period:	\$70.00						
1. Name (Last, First):	Davidson, Karen						
2. Address:	2443 Pine Valley						
3. City/State/Zip:	Colorado Springs, CO, 80920						
4. Description:	check						
5. Employer (mandatory if employed):	retired						
6. Occupation (mandatory if employed):							
7. Date Accepted:	03/09/2015						
8. Aggregate Amount this Election Cycle:	\$100.00						
9. Contribution Amount this Reporting Period:	\$100.00						
1. Name (Last, First):	Tollefson, Dean						
2. Address:	1110 Mcarthur Ave						
3. City/State/Zip:	Colorado Springs, CO, 80909						
4. Description:	check						
5. Employer (mandatory if employed):	retired						
6. Occupation (mandatory if employed):							
7. Date Accepted:	03/09/2015						
8. Aggregate Amount this Election Cycle:	\$85.00						
9. Contribution Amount this Reporting Period:	\$85.00						

Schedule B - Itemized Expenditures Statement (\$20 or more)				
Full Name of Committee/Person:		Glenn Carlson		
Please Print/Type				
1. Name (Last, First):	SonicPrint,			
2. Address:	5018 Tampa Blvd			
3. City/State/Zip:	Tampa, FL, 33634			
4. Purpose of Expenditure:	large campaign signs			
5. Date Expended:	03/09/2015			
6. Amount:	\$681.27			