

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Perso	n:	IACE Action - CS	;		
		As Shown on Regist	ration		
Address of Committee/Person		PO Box 88140			
City, State & Zip Code:		Colorado Springs, CO, 80908			
Committee Type:		Political			
Name of Financial Institution:		Wells Fargo			
Address of Financial Institution		9649 PROMINENT PT			
City, State & Zip Code of Financial Institution		Colorado Springs, CO, 80924			
	ends previous report filed on (new information ONLY	2015 Through	D	04/03/2015 ate	
Please complete applicable sche	edules prior to completing	g the information ir			
1 Europe on Llond of the Design	ing of Deporting Deviad		lota	Is Detailed Summary Page	
1 Funds on Hand at the Beginn				\$0.00 \$0.00	
2 Total Monetary Contributions (line 11 of Detailed Summary)				\$0.00	
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)				\$0.00	
 4 Total Spending (line 20 of Detailed Summary) 5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4) 			U	\$0.00	
· · · · ·	I by either the Registered Ager ty of perjury, that to the best of attachments, are true and corr uding any contributions receive	nt OR the Candidate): f my knowledge or believect, and that to the bested in the form of memb	ef the inforr	nation or statements on this form, owledge or belief all contributions	
Print Candidate Name:	IACE Action - CS		-		
Candidate's Signature:	(Submitted Electronical	lv)	Date:	05/04/2015	

]	Detailed Summary	
	l	-	
	f Committee/Persor		1
Current Rep	oorting Period:	03/11/2015 Through	04/03/2015
Funds on ha	nd at the beginning	g of reporting period (Monetary Only)	\$0.00
6	Itemized Mone	\$0.00	
7	Total of Non-Itemi	zed Contributions (\$19.99 or Less)	\$0.00
	(Number of Co	ntributions of \$19.99 or Less: 0)	
8		Loans Received	\$0.00
	(Ple	ease list on Schedule "C")	
9 To		al of Other Receipts	\$0.00
	(1)	nterest, Dividends, etc.)	
10 Returned		xpenditures (from recipient)	\$0.00
	(Ple	ease list on Schedule "D")	
11 Tot a		Ionetary Contributions	\$0.00
	(Tot	al of lines 6 through 10)	
12 Total N	Total Nor	n-Monetary Contributions	\$0.00
	(From Statement of N	on-Monetary Contributions Schedule "A-2")	
13		otal Contributions	\$0.00
		(Line 11 + Line 12)	
14 Itemiz	Itemized	Expenditures \$20 or More	\$0.00
	(Ple	ease list on Schedule "B")	
15 Total o	Total of N	on-Itemized Expenditures	\$0.00
	(Expe	enditures of \$19.99 or Less)	
16 L	Loa	n Repayments Made	\$0.00
	(Ple	ase List on Schedule "C")	
17	Returned	Contributions (To donor)	\$0.00
	(Pleas	se list on Schedule "D")	
18	Clo	seout Distributions	\$0.00
	(Balance must	be zero. Please attach Schedule E.)	
19	(Inte	ntionally Left Blank)	
20		Total Spending	\$0.00
	(Lines 14 through 17)		