

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Person:		IACE Action - CS		
		As Shown on Registra	ation	
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		
Submit changes or]. ends previous report filed on (o new information ONLY	late)		
Final Filing. Reporting Period Covered:	03/30/2	2015 Through		05/07/2015
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	Date		D	ale
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Detailed Summary

Full Name of Committee/Person:

IACE Action - CS

Current Reporting Period: 03/30/2015 Through 05/07/2015

Funds o	on hand at the beginning of reporting period (Monetary Only)	\$0.00
6	Itemized Monetary Contributions \$20 or More	\$3,451.96
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	\$3,451.96
	(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	\$3,451.96
	(Line 11 + Line 12)	
14	Itemized Expenditures \$20 or More	\$3,451.96
	(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	\$3,451.96
	(Lines 14 through 17)	

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

Full Name of Committee/Person: IACE Action - CS

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

Please Print/Type

1. Name (Last, First):	IACE Action,
2. Address:	PO Box 88140
3. City/State/Zip:	Black Forest, CO, 80908
4. Description:	Bank Transfer
5. Employer (mandatory if employed):	
6. Occupation (mandatory if employed):	
7. Date Accepted:	04/08/2015
8. Aggregate Amount this Election Cycle:	\$3,451.96
9. Contribution Amount this Reporting Period:	\$3,451.96

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

Full Name of Committee/Person: IACE Action - CS

Please Print/Type

1. Name (Last, First):	FLS Connect,
2. Address:	7300 Hudson Blvd. Suite 270
3. City/State/Zip:	St Paul, MN, 55128
4. Purpose of Expenditure:	Robocall
5. Date Expended:	05/03/2015
6. Amount:	\$951.96
1. Name (Last, First):	Avinova Media,
2. Address:	9088 S. Ridgeline Blvd. Suite 103
3. City/State/Zip:	Highlands Ranch, CO, 80129
4. Purpose of Expenditure:	Digital Media
5. Date Expended:	04/08/2015
6. Amount:	\$2,500.00