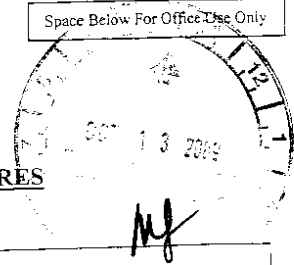


Colorado Secretary of State
Elections Division
1700 Broadway, Ste. 270
Denver, CO 80290
Ph: (303) 894-2200 x 3
Fax: (303) 869-4861
www.sos.state.co.us



Space Below For Office Use Only



REPORT OF CONTRIBUTIONS AND EXPENDITURES
(C.R.S. 1-45-108)

Full Name of Committee/Person: Committee to Elect Al Loma
As Shown On Registration

Address of Committee/Person: 120 S. Tejon St., Ste 206

City, State & Zip Code: Colorado Springs, CO 80903

Committee Type: CANDIDATE

Name and Address of Financial Institution: Great Western Bank
121 S. Tejon, Ste 110 Colo Spgs CO 80903

SOS ID NUMBER (state committees ONLY): _____

Type of Report

- Regularly Scheduled Filing. _____
- Amended Filing. This amends previous report filed on (date) _____
Submit changes or new information ONLY
- Termination Report. (Termination Reports MUST Have a Monetary Balance of Zero in Line 5)
- Check this box if this Report Contains Electioneering Communications Information

Reporting Period Covered: 30 Oct 2008 Through 8 October 2009
date date

Declared Total Spending (if applicable) \$ _____
[Art. XXVIII, Sec. 4(1)]

	Totals Detailed Summary Page
1 Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 0
2 Total Monetary Contributions (line 11)	\$ 155.15
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 155.15
4 Total Monetary Expenditures (line 19)	\$ 30.15
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 125.00

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.
[Art. XXVIII Sec. 10(2)(a)]

Authorization (Must be completed by either the Registered Agent OR the Candidate)

Print Registered Agent's (Treasurer's) Name: Donald J. Alberts

Registered Agent's (Treasurer's) Signature: Donald J. Alberts Date: 13 Oct 09

Print Candidate Name: _____ Date: _____

Candidates Signature: _____

DETAILED SUMMARY

Full Name of Committee/Person: Committee to Elect Al Loma

Current Reporting Period: 30 Oct 08 Through 8 Oct 09

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	0
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	125.0
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	30.15
8	Loans Received (Please list on Schedule "C")	\$	0.
9	Total of Other Receipts (Interest, Dividends, etc.)	\$	0.
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$	0.
11	Total Monetary Contributions (Total of lines 6 through 10)	\$	155.15
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	0.00
13	Total Contributions (Line 11 + line 12)	\$	155.15
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	0.
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	30.15
16	Loan Repayments Made (Please list on Schedule "C")	\$	0
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$	0
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$	0
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$	30.15
20	Total Spending (Line 18 + line 19)	\$	30.15

Schedule A – Itemized Contributions Statement (\$20 or more)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. Date Accepted <u>08/25/09</u>	4. Name (Last, First): <u>BARRERA, J. J.</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>P.O. Box 2663</u>
3. Aggregate Amt. * \$ <u>50.00</u>	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80901-2663</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>09/17/09</u>	4. Name (Last, First): <u>BREAZELL, Willie H.</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>5780 TOMAH DR</u>
3. Aggregate Amt. * \$ <u>50.00</u>	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80918-1933</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>09/21/09</u>	4. Name (Last, First): <u>NORTON, Toby J</u>
2. Contribution Amt. \$ <u>25.00</u>	5. Address: <u>1306 Swope Dr</u>
3. Aggregate Amt. * \$ <u>25.00</u>	6. City/State/Zip: <u>COLORADO SPRINGS, CO 80909</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted	4. Name (Last, First): _____
2. Contribution Amt. \$	5. Address: _____
3. Aggregate Amt. * \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec. 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).