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REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Person: Yolanda Avila

As Shown On Registration

Address of Committee/Person: 301 Audubon Dr.

City, State & Zip Code: Colo. Spgs. Co. 80900

Committee Type:

Name and Address of Financial Institution: East Federal Credit Union

123 Weber
Colo. Spgs. Co. 80903

Type of Report

- Regularly Scheduled Filing.
- Amended Filing. This amends previous report filed on (date)
Submit changes or new information ONLY
- Final Filing.

Reporting Period Covered: FEB. 25, 2015 Through March 10, 2015
Date Date

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 494.05
2	Total Monetary Contributions (line 11)	\$ 0
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 0
4	Total Spending (line 20)	\$ 200.00
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 294.05

Authorization (Must be completed by either the Registered Agent OR the Candidate): I hereby certify and declare, under penalty of perjury, that to the best of my knowledge or belief the information or statements on this form, including all schedules, statements, and attachments, are true and correct, and that to the best of my knowledge or belief all contributions received during this reporting period including any contributions received in the form of membership dues transferred by a membership organization are from permissible sources.

Print Registered Agent's Name: Mary Josephine Ornelas

Registered Agent's Signature: Mary Josephine Ornelas Date: 3/16/2015

Print Candidate Name: Yolanda Avila

Candidates Signature: [Signature] Date: 3/16/2015

DETAILED SUMMARY

Full Name of Committee/Person: Gabardo Avela

Current Reporting Period: Feb 25-2015 Through: March 10-2015

	Funds on hand at the beginning of reporting period (Monetary Only)	\$ 494.05
6	Itemized Contributions \$20 or More (Please list on Schedule "A")	\$ 0
7	Total of Non-Itemized Contributions (\$19.99 or Less) (Number of Contributions of \$19.99 or Less <input type="text"/>)	\$ 0
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)	\$ 0
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 0
13	Total Contributions (Line 11 + line 12)	\$ 0
14	Itemized Expenditures \$20 or More (Please list on Schedule "B")	\$ 200.00
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 0
16	Loan Repayments Made (Please list on Schedule "C")	\$ 0
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ 0
18	Closeout Distributions (Balance must be zero. Please attach Schedule E.)	\$ 0
19	(Intentionally left Blank)	\$
20	Total Spending (Lines 14 through 17)	\$ 200.00

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

Full Name of Committee/Person: Yolanda Avila

PLEASE PRINT/TYPE

1. Name: Metro Mobility

2. Address: 1015 TRANSIT DR.

3. City/State/Zip: Colorado Springs Co. 80913

4. Purpose of Expenditure: Passes purchased for transportation to & from candidates events

5. Date Expended: 2/26/2015

6. Amount: \$ 140.00

1. Name: Sandy Ho

2. Address: 3770 Hickory Hill DR.

3. City/State/Zip: Colo Spgs Co. 80906

4. Purpose of Expenditure: Administrative Assistant services

5. Date Expended: (1) 3/16/15 = 12 x 1.5 hrs = 18.00
(2) 3/16/15 = 12 x 3.5 " 42.00 TOTAL 60.00

6. Amount: \$ 60.00

1. Name: _____

2. Address: _____

3. City/State/Zip: _____

4. Purpose of Expenditure: _____

5. Date Expended: _____

6. Amount: \$ _____

Schedule B Itemized Expenditures Statement (\$20 or more)
Page ____ of ____
Use additional pages as necessary