

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: KAREN Cullen FOR Council  
As Shown On Registration

Address of Committee/Person: 202/208 Ruxton Avenue

City, State & Zip Code: MANitou Spgs CO 80829

Committee Type:

Name and Address of Financial Institution: The BANK at Broadmoor 3216 W. Colorado Ave  
C15 CO 80904

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: August 31, 2009 Through October 13, 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)	\$ 0.00
2 Total Monetary Contributions (line 11)	\$ 2925.00
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 2925.00
4 Total Monetary Expenditures (line 19)	\$ 1917.40
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 1007.60

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): *I hereby certify and declare, under penalty of perjury, 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: \_\_\_\_\_

Registered Agent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Candidate Name: KAREN Cullen

Candidates Signature: Karen A Cullen Date: 10/13/09

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**DETAILED SUMMARY**

Full Name of Committee/Person: Karen Culle FOR Council 1

Current Reporting Period: August 31, 2009 Through October 13, 2009

	<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>	\$	2750.00
6	<b>Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "A")	\$	0.00
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$	0.00
8	<b>Loans Received</b> (Please list on Schedule "C")	\$	0.00
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$	0.00
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$	175.00
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$	2925.00
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$	0.00
13	<b>Total Contributions</b> (Line 11 + line 12)	\$	2925.00
14	<b>Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "B")	\$	1893.40
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$	24.00
16	<b>Loan Repayments Made</b> (Please list on Schedule "C")	\$	0.00
17	<b>Returned Contributions (To donor)</b> (Please list on Schedule "D")	\$	0.00
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$	0.00
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$	1917.40
20	<b>Total Spending</b> (Line 18 + line 19)	\$	1917.40

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

Full Name of Committee/Person: KAREN CULLEN FOR COUNCIL

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

PLEASE PRINT/TYPE

1. Date Accepted <u>9/15/09</u>	4. Name (Last, First): <u>Wolbrueck, Susan</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>11 OTOE PLACE</u>
3. Aggregate Amt. * \$ <u>100.00</u>	6. City/State/Zip: <u>Manitou Spgs, CO 80829</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CK#1493, Deposit 10/2/09</u>
	8. Employer (if applicable, mandatory): <u>RETRO MOTO</u>
	9. Occupation (if applicable, mandatory): <u>Self employed</u>

1. Date Accepted <u>9/24/09</u>	4. Name (Last, First): <u>Patsy's Concessions</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>930 MANITOU S AVE.</u>
3. Aggregate Amt. * \$ <u>100.00</u>	6. City/State/Zip: <u>MANITOU SPGS, CO 80829</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CK#2755, Deposit 10/2/09</u>
	8. Employer (if applicable, mandatory): <u>PASTY'S CONCESSIONS</u>
	9. Occupation (if applicable, mandatory): <u>Self employed</u>

1. Date Accepted <u>10/2/09</u>	4. Name (Last, First): <u>Eurich, Brett R.</u>
2. Contribution Amt. \$ <u>750.00</u>	5. Address: <u>1915 E. KIOWA ST.</u>
3. Aggregate Amt. * \$ <u>750.00</u>	6. City/State/Zip: <u>CO SPGS, CO 80909-5820</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CK#868, Deposit 10/5/09</u>
	8. Employer (if applicable, mandatory): <u>Cliff House</u>
	9. Occupation (if applicable, mandatory): <u>Purchasing Director</u>

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).

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

Full Name of Committee/Person: KAREN CULLEN FOR COUNCIL

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

PLEASE PRINT/TYPE

1. Date Accepted <u>8/31/09</u>	4. Name (Last, First): <u>Cullen, Karen</u>
2. Contribution Amt. \$ <u>700.00</u>	5. Address: <u>208 Ruxton Ave.</u>
3. Aggregate Amt. * \$ <u>700.00</u>	6. City/State/Zip: <u>Manitou Spgs, CO 80829</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CK #2135, Deposit 8/31/09</u>
	8. Employer (if applicable, mandatory): <u>1892 Victoria's Keep B&amp;B</u>
	9. Occupation (if applicable, mandatory): <u>Self employed</u>

1. Date Accepted <u>9/7/09</u>	4. Name (Last, First): <u>White, Gordon</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>925 Manitou Ave</u>
3. Aggregate Amt. * \$ <u>100.00</u>	6. City/State/Zip: <u>Manitou Spgs CO 80829</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CK #6096, Deposited 9/9/09</u>
	8. Employer (if applicable, mandatory): <u>GORDON'S GOLD AND SILVER</u>
	9. Occupation (if applicable, mandatory): <u>Self employed</u>

1. Date Accepted <u>9/8/09</u>	4. Name (Last, First): <u>HAAS, Tim or Terry PARTNER, LLC</u>
2. Contribution Amt. \$ <u>500.00</u>	5. Address: <u>324 Beckers Lane</u>
3. Aggregate Amt. * \$ <u>500.00</u>	6. City/State/Zip: <u>Manitou Spgs CO 80829</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CK #8293, Deposit 9/9/09</u>
	8. Employer (if applicable, mandatory): <u>GARDEN OF GODS TRADING POST</u>
	9. Occupation (if applicable, mandatory): <u>Self employed</u>

1. Date Accepted <u>9/16/09</u>	4. Name (Last, First): <u>The Manitou &amp; Pike's Peak Railway Company</u>
2. Contribution Amt. \$ <u>500.00</u>	5. Address: _____
3. Aggregate Amt. * \$ <u>500.00</u>	6. City/State/Zip: <u>Manitou Spgs, CO 80829</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CK #35001, Deposit 9/23/09</u>
	8. Employer (if applicable, mandatory): <u>Coq Railway</u>
	9. Occupation (if applicable, mandatory): <u>Self employed</u>

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