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### REPORT OF CONTRIBUTIONS AND EXPENDITURES

| F   | ull Name of Committee/Person:                   | Melanie Bernhai                    | rdt                          |  |  |
|---|---|------------------------------------|------------------------------|--|--|
|   | ,   | As Shown On Registration           |                              |  |  |
| Address of Committee/Person:  |   | 4790 Wells Branch H                | ts 101                       |  |  |
| City, State & Zip Code:   |   | Colorado Springs CO                | 80923                        |  |  |
| Committee Type:   |   | Committee to Elect M               |                              |  |  |
| Name of Financial Institution:  |   | USAA                               |                              |  |  |
| Address Of Financial Institution:   |   | 1825 Telstar Dr                    |                              |  |  |
| City, State & Zip Code Financial Institution:   |   | Colorado Springs, CO 80922         |                              |  |  |
| 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:  02/16/2017 Through  |   |                                    |                              |  |  |
| ا ما  | oso complete applicable askastulas              | Date                               | Date                         |  |  |
| iea   | ase complete applicable schedules pric          | or to completing the inf           | Totals Detailed Summary Page |  |  |
|   | Funds on Hand at the Beginning of Repo          | rtina Period (monetary only)       | \$ 0.00                      |  |  |
| 2   | Total Monetary Contributions (line 11 of Detail |                                    | \$ 33.21                     |  |  |
| 3   | Total of Monetary Contributions & Beginn        |                                    | \$ 33.21                     |  |  |
| 1   | Total Spending (line 20 of Detailed Summary)    | <u> </u>                           | \$ 33.21                     |  |  |
| 5   | Funds on Hand at the End of Reporting P         | eriod (monetary) (line 3 – line 4) | \$ 0.00                      |  |  |
| <b>Authorization</b> (Must be completed by either the Registered Agent <b>OR</b> 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: Melai            |                                    | 00/00/0047                   |  |  |
|   | Registered Agent's Signature:                   | - RTMF                             | Date: <u>02/28/2017</u>      |  |  |
| Print Candidate Name: Melanie Bernhardt   |   |                                    |                              |  |  |
|   | Candidates Signature:                           |                                    | oate: 02/28/2017             |  |  |

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#### **DETAILED SUMMARY**

# Full Name of Committee/Person: Melanie Bernhardt

Current Reporting Period: 02/16/2017 Through: 02/28/2017

| Fund | ds on hand at the beginning of reporting period (Monetary Only)                                     | \$ 0.00             |
|------|---|---------------------|
| 6    | Itemized Monetary Contributions \$20 or More (Please list on Schedule "A-1")                        | \$ 33.21            |
| 7    | Total of Non-Itemized Contributions (\$19.99 or Less)  (Number of Contributions of \$19.99 or Less) | \$ 0.00             |
| 8    | Loans Received<br>(Please list on Schedule "C")   | \$ 0.00             |
| 9    | <b>Total of Other Receipts</b><br>(Interest, Dividends, etc.)                                       | \$ 0.00             |
| 10   | Returned Expenditures (from recipient) (Please list on Schedule "D")                                | \$ 0.00             |
| 11   | Total Monetary Contributions (Total of lines 6 through 10)  | <sup>\$</sup> 33.21 |
| 12   | Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions Schedule "A-2")      | \$ 0.00             |
| 13   | <b>Total Contributions</b> (Line 11 + line 12)  | \$ 33.21            |
| 14   | Itemized Expenditures \$20 or More (Please list on Schedule "B")                                    | \$ 33.21            |
| 15   | Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)                                | \$ 0.00             |
| 16   | Loan Repayments Made<br>(Please list on Schedule "C")   | \$ 0.00             |
| 17   | Returned Contributions (To donor) (Please list on Schedule "D")                                     | \$ 0.00             |
| 18   | Closeout Distributions (Balance must be zero. Please attach Schedule E.)                            | \$ 0.00             |
| 19   | ( Intentionally left Blank)   | \$                  |
| 20   | <b>Total Spending</b> (Lines 14 through 17)   | \$ 33.21            |

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

Full Name of Committee/Person: Melanie Bernhardt

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

PLEASE PRINT/TYPE 1. Name (Last, First): Bernhardt, Melanie 2. Address: 4790 Wells Branch Hts 101 3. City/State/Zip: Colorado Springs, CO 80923 4. Description: Social Media Advertisement Payment 5. Employer (mandatory if employed): NA 6. Occupation (mandatory if employed): NA 7. Date Accepted: <u>02/25/2017</u> 8. Aggregate Amount This Election Cycle: 33.21<sub>\$</sub>33.21

| 1. Name (Last, First):                       |    |
|--|----|
| 2. Address:                                  |    |
| 3. City/State/Zip:                           | -  |
| 4. Description:                              | _  |
| 5. Employer (mandatory if employed):         |    |
| 6. Occupation (mandatory if employed):       | -  |
| 7. Date Accepted:                            |    |
| 8. Aggregate Amount This Election Cycle:     |    |
| 9 Contribution Amount This Reporting Period: | \$ |

Schedule A-1 Itemized Contributions Statement (\$20 or more) Page \_\_\_\_ of \_ Use additional pages as necessary

9. Contribution Amount This Reporting Period:

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

Full Name of Committee/Person: Melanie Bernhardt

| PLEASE PRINT/TYPE                                   |                     |
|---|---------------------|
| 1. Name (Last, First): Melanie Bernhardt            |                     |
| 2. Address: 4790 Wells Branch Hts 101               |                     |
| 3. City/State/Zip: Colorado Springs CO 80923        |                     |
| 4. Purpose of Expenditure: Social Media Advertising |                     |
| 5. Date Expended: 02/25/2017                        |                     |
| 6. Amount:  | <sub>\$</sub> 33.21 |
|   |                     |
| 1. Name (Last, First):                              |                     |
| 2. Address:   |                     |
| 3. City/State/Zip:                                  |                     |
| 4. Purpose of Expenditure:                          |                     |
| 5. Date Expended:                                   |                     |
| 6. Amount:  | \$                  |
| 1. Name (Last, First):                              |                     |
| 2. Address:   |                     |
| Z. Addiess  |                     |
| 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

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