



REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Person: HBA Political Action Committee

As Shown On Registration

Table with 2 columns: Field Name, Value. Fields include Address of Committee/Person, City, State & Zip Code, Committee Type, Name of Financial Institution, Address Of Financial Institution, City, State & Zip Code Financial Institution.

CITY CLERK'S OFFICE
2017 MAY -5 10 2: 39

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: 03/27/2017 Through 04/30/2017

Please complete applicable schedules prior to completing the information in the following table.

Table with 3 columns: Line Number, Description, Totals Detailed Summary Page. Rows include Funds on Hand at the Beginning of Reporting Period, Total Monetary Contributions, Total of Monetary Contributions & Beginning Amount, Total Spending, Funds on Hand at the End of Reporting Period.

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: Kyle Campbell
Registered Agent's Signature: Kyle Campbell Date: 04/30/2017
Print Candidate Name:
Candidates Signature: Date:

DETAILED SUMMARY

Full Name of Committee/Person: HBA Political Action Committee

Current Reporting Period: 03/27/2017

Through: 04/30/2017

| | | |
|----|--|--------------|
| | Funds on hand at the beginning of reporting period (Monetary Only) | \$ 26,395.65 |
| 6 | Itemized Monetary Contributions \$20 or More (Please list on Schedule "A-1") | \$ |
| 7 | Total of Non-Itemized Contributions (\$19.99 or Less) (Number of Contributions of \$19.99 or Less <input type="text"/>) | \$ 0.00 |
| 8 | Loans Received (Please list on Schedule "C") | \$ |
| 9 | Total of Other Receipts (Interest, Dividends, etc.) | \$ |
| 10 | Returned Expenditures (from recipient) (Please list on Schedule "D") | \$ |
| 11 | Total Monetary Contributions (Total of lines 6 through 10) | \$ 0.00 |
| 12 | Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions Schedule "A-2") | \$ |
| 13 | Total Contributions (Line 11 + line 12) | \$ 0.00 |
| 14 | Itemized Expenditures \$20 or More (Please list on Schedule "B") | \$ 3,000.00 |
| 15 | Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less) | \$ 0.00 |
| 16 | Loan Repayments Made (Please list on Schedule "C") | \$ |
| 17 | Returned Contributions (To donor) (Please list on Schedule "D") | \$ |
| 18 | Closeout Distributions (Balance must be zero. Please attach Schedule E.) | \$ 0.00 |
| 19 | (Intentionally left Blank) | \$ |
| 20 | Total Spending (Lines 14 through 17) | \$ 3,000.00 |

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

Full Name of Committee/Person: HBA Political Action Committee

PLEASE PRINT/TYPE

| | |
|--|--------------------|
| 1. Name (Last, First): <u>Committee to Elect Greg Basham</u> | |
| 2. Address: <u>PO Box 5136</u> | |
| 3. City/State/Zip: <u>Colorado Springs, CO 80904</u> | |
| 4. Purpose of Expenditure: <u>Political Campaign</u> | |
| 5. Date Expended: <u>04/28/2017</u> | |
| 6. Amount: | \$ <u>1,500.00</u> |

| | |
|--|--------------------|
| 1. Name (Last, First): <u>Friends of Lynette Crow-Iverson District 5</u> | |
| 2. Address: <u>PO Box 954</u> | |
| 3. City/State/Zip: <u>Colorado Springs, CO 80901</u> | |
| 4. Purpose of Expenditure: <u>Political Campaign</u> | |
| 5. Date Expended: <u>04/28/2017</u> | |
| 6. Amount: | \$ <u>1,500.00</u> |

| | |
|----------------------------------|----------|
| 1. Name (Last, First): _____ | |
| 2. Address: _____ | |
| 3. City/State/Zip: _____ | |
| 4. Purpose of Expenditure: _____ | |
| 5. Date Expended: _____ | |
| 6. Amount: | \$ _____ |