

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS 16 JUN 17 PM 1:10 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Robert Blaha for Colorado

ADDRESS (number and street)

1155 Kelly Johnson Blvd

Suite 110

Check if different than previously reported. (ACC)

Colorado Springs

CO

80920

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00605428

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P)
General (12G)
Runoff (12R)
Convention (12C)
Special (12S)

Election on 06 / 28 / 2016 in the State of CO

(c) 30-Day POST-Election Report for the:

- General (30G)
Runoff (30R)
Special (30S)

Election on / / in the State of

5. Covering Period

04 / 01 / 2016

through

06 / 08 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jerry Hilderbrand

Signature of Treasurer Jerry Hilderbrand

Date

06 / 13 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

201606170200199561

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Robert Blaha for Colorado**

Report Covering the Period: From: 

M	M
04	

 / 

D	D
01	

 / 

Y	Y	Y	Y
2016			

 To: 

M	M
06	

 / 

D	D
08	

 / 

Y	Y	Y	Y
2016			

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	125088.12	221521.23
(b) Total Contribution Refunds (from Line 20(d)) ..	10800.00	10800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	114288.12	210721.23
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	506942.03	932544.01
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	506942.03	932544.01
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	278177.22	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...</b>	1059714.40	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

201606170200199562

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 87

Write or Type Committee Name

**Robert Blaha for Colorado**

Report Covering the Period: From:

MM / DD / YYYY  
04 / 01 / 2016

To:

MM / DD / YYYY  
06 / 08 / 2016

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A)...

57830.00

115991.00

(ii) Unitemized .....

67258.12

105530.23

(iii) TOTAL of contributions from individuals .

125088.12

221521.23

(b) Political Party Committees...

0.00

0.00

(c) Other Political Committees (such as PACs)...

0.00

0.00

(d) The Candidate .....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

125088.12

221521.23

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate...

0.00

1000000.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0.00

1000000.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)..

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

125088.12

1221521.23

201606170200199563

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	506942.03	932544.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	10800.00	10800.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	10800.00	10800.00
21. OTHER DISBURSEMENTS ...	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	517742.03	943344.01

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	670831.13
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	125088.12
25. SUBTOTAL (add Line 23 and Line 24)...	795919.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	517742.03
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	278177.22

201606170200199564

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.** Full Name (Last, First, Middle Initial)  
**S Boyd Adams**

Mailing Address **4540 Silver Dale Ct**

City **Castle Rock** State **CO** Zip Code **80108**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**05 / 31 / 2016**

Transaction ID : **SA11AI.8321**

Amount of Each Receipt this Period  
**250.00**

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MR JOHN T ALDERSON**

Mailing Address **1 WITHERSPOON APT 150**

City **IRVINE** State **CA** Zip Code **92604**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **201.00**

Date of Receipt  
**05 / 16 / 2016**

Transaction ID : **SA11AI.8854**

Amount of Each Receipt this Period  
**50.00**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MR JOHN T ALDERSON**

Mailing Address **1 WITHERSPOON APT 150**

City **IRVINE** State **CA** Zip Code **92604**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **241.00**

Date of Receipt  
**05 / 26 / 2016**

Transaction ID : **SA11AI.8853**

Amount of Each Receipt this Period  
**40.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**340.00**

201606170200199565

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.** Full Name (Last, First, Middle Initial)  
**Jeff Bailey**

Mailing Address 4940 Foxchase Way

City Colorado Springs State CO Zip Code 80908

FEC ID number of contributing federal political committee. **C**

Name of Employer Service Source Occupation Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2016

Transaction ID : SA11AI.6857

Amount of Each Receipt this Period  
2700.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MISS CONSTANCE C BARNES**

Mailing Address 244 LIBERTY ST

City WARSAW State NY Zip Code 14569

FEC ID number of contributing federal political committee. **C**

Name of Employer Service Source Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 201.00

Date of Receipt  
MM / DD / YYYY  
05 / 02 / 2016

Transaction ID : SA11AI.10089

Amount of Each Receipt this Period  
45.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MISS CONSTANCE C BARNES**

Mailing Address 244 LIBERTY ST

City WARSAW State NY Zip Code 14569

FEC ID number of contributing federal political committee. **C**

Name of Employer Service Source Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 236.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2016

Transaction ID : SA11AI.10090

Amount of Each Receipt this Period  
35.00

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2780.00

201606170200199566

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.** Full Name (Last, First, Middle Initial)  
**David Begin**

Mailing Address 15230 Bovary Ct

City Colorado Springs State CO Zip Code 80921

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Small Business Owner.

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2016

Transaction ID : SA11AI.6676

Amount of Each Receipt this Period  
500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**HELEN BEWICK**

Mailing Address 7510 CONIFER CT

City TEMPERANCE State MI Zip Code 48182

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2016

Transaction ID : SA11AI.9409

Amount of Each Receipt this Period  
1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**David Blaha**

Mailing Address 8110 Valdez Circle

City Urbandale State IA Zip Code 50322

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2016

Transaction ID : SA11AI.8198

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

201606170200199567

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.** Full Name (Last, First, Middle Initial)  
**David Bullock**

Mailing Address 2750 Garden Lane

City Greenwood Village State CO Zip Code 80121

FEC ID number of contributing federal political committee. **C**

Name of Employer ReNew, LLC Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2016

Transaction ID : SA11AI.8303

Amount of Each Receipt this Period  
500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**John Camardella**

Mailing Address 850 Lake Medlock Drive

City Johns Creek State GA Zip Code 30022

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2016

Transaction ID : SA11AI.6689

Amount of Each Receipt this Period  
100.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MS SUE M CANNON**

Mailing Address 6420 W LAKERIDGE RD

City LAKEWOOD State CO Zip Code 80227

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2016

Transaction ID : SA11AI.9289

Amount of Each Receipt this Period  
1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1600.00

201606170200199568



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.**

Full Name (Last, First, Middle Initial)  
**MR WALTER CLAIBORNE**

Mailing Address **14217 CLAIBORNE RD**

City **BATCHELOR** State **LA** Zip Code **70715**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF** Occupation **REAL ESTATE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt **04 / 26 / 2016**

Transaction ID : **SA11A1.7670**

Amount of Each Receipt this Period **200.00**

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
**Tom Connellan**

Mailing Address **882 Belvedere Blvd**

City **Charlottesville** State **VA** Zip Code **22901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **The Connellan Group, Inc.** Occupation **author**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **05 / 05 / 2016**

Transaction ID : **SA11A1.6864**

Amount of Each Receipt this Period **500.00**

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
**Traci Coughlin**

Mailing Address **12496 Creekhurst Drive**

City **Colorado Springs** State **CO** Zip Code **80921**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Consultant**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **06 / 03 / 2016**

Transaction ID : **SA11A1.8350**

Amount of Each Receipt this Period **1000.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... **1700.00**

**TOTAL** This Period (last page this line number only).....

201606170200199569

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.** Full Name (Last, First, Middle Initial)  
**Catharine Courtnage**

Mailing Address **3600 Medinah Ave**  
**W**

City **Southport** State **NC** Zip Code **28461**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**MM / DD / YYYY**  
**05 / 19 / 2016**

Transaction ID : **SA11A1.8210**

Amount of Each Receipt this Period  
**250.00**

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MRS BETTY R CRAWFORD**

Mailing Address **601 ASPEN TRL**

City **MUSCATINE** State **IA** Zip Code **52761**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
**MM / DD / YYYY**  
**05 / 19 / 2016**

Transaction ID : **SA11A1.8984**

Amount of Each Receipt this Period  
**200.00**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Brandon Davis**

Mailing Address **8100 E. Maplewood Ave**  
**Suite 200**

City **Englewood** State **CO** Zip Code **80111**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Swan Energy** Occupation **CEO**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**MM / DD / YYYY**  
**06 / 06 / 2016**

Transaction ID : **SA11A1.8375**

Amount of Each Receipt this Period  
**2700.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3150.00**

201606170200199570

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.**

Full Name (Last, First, Middle Initial)  
**Eric Davis**

Mailing Address **7335 Wildridge Road**

City **Colorado Springs** State **CO** Zip Code **80908**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Integrity Trust Company** Occupation **CIO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **05 / 27 / 2016**

Transaction ID : **SA11A1.8293**

Amount of Each Receipt this Period **500.00**

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
**MR RAYMOND DEBBANE**

Mailing Address **10 QUAIL RD**

City **GREENWICH** State **CT** Zip Code **06831**

FEC ID number of contributing federal political committee. **C**

Name of Employer **The Invus Group** Occupation **President & CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **04 / 07 / 2016**

Transaction ID : **SA11A1.8178**

Amount of Each Receipt this Period **1000.00**

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
**Wayne Denley**

Mailing Address **1906 Albert Street**

City **Alexandria** State **LA** Zip Code **71301**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CLEDA** Occupation **Economic Developer**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **05 / 23 / 2016**

Transaction ID : **SA11A1.8212**

Amount of Each Receipt this Period **250.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... **1750.00**

**TOTAL** This Period (last page this line number only).....

201606170200199571

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.** Full Name (Last, First, Middle Initial)  
**RAYMOND A DIRKS**

Mailing Address 12581 AIRPORT RD

City LONGMONT State CO Zip Code 80503

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2016

Transaction ID : SA11AI.7545

Amount of Each Receipt this Period  
2700.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MS VICTORIA I FORD**

Mailing Address 4303 FOREST PARK RD

City JACKSONVILLE State FL Zip Code 32210

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 07 / 2016

Transaction ID : SA11AI.10547

Amount of Each Receipt this Period  
100.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Heidi Ganahl**

Mailing Address 1705 Eldorado Cr

City Superior State CO Zip Code 80027

FEC ID number of contributing federal political committee. **C**

Name of Employer Camp Bow Wow Occupation Founder/Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2016

Transaction ID : SA11AI.6687

Amount of Each Receipt this Period  
250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3050.00

201606170200199572

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 11d	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>MRS BETTY GARDNER</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2016
Mailing Address 1572 GOODIN HOLLOW RD		Transaction ID : SA11AI.7598
City NOEL	State MO	Zip Code 64854
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 135.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 321.00	

Full Name (Last, First, Middle Initial) <b>MRS BETTY GARDNER</b>		Date of Receipt MM / DD / YYYY 04 / 22 / 2016
Mailing Address 1572 GOODIN HOLLOW RD		Transaction ID : SA11AI.7596
City NOEL	State MO	Zip Code 64854
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 421.00	

Full Name (Last, First, Middle Initial) <b>MRS BETTY GARDNER</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2016
Mailing Address 1572 GOODIN HOLLOW RD		Transaction ID : SA11AI.9536
City NOEL	State MO	Zip Code 64854
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 621.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	435.00
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199573

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.** Full Name (Last, First, Middle Initial)  
**MRS BETTY GARDNER**

Mailing Address **1572 GOODIN HOLLOW RD**

City **NOEL** State **MO** Zip Code **64854**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **771.00**

Date of Receipt  
**05 / 23 / 2016**

Transaction ID : **SA11A1.9537**

Amount of Each Receipt this Period  
**150.00**

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**R Dave Garwood**

Mailing Address **8400 Jett Ferry Road**

City **Atlanta** State **GA** Zip Code **30350**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Lawyer**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
**05 / 01 / 2016**

Transaction ID : **SA11A1.6862**

Amount of Each Receipt this Period  
**2000.00**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MR RICHARD A GRAHAM**

Mailing Address **12725 TAHOSA LN**

City **COLORADO SPRINGS** State **CO** Zip Code **80908**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self - Employed** Occupation **Real Estate Professional**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**05 / 27 / 2016**

Transaction ID : **SA11A1.8768**

Amount of Each Receipt this Period  
**1700.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3850.00**

201606170200199574

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.** Full Name (Last, First, Middle Initial)  
**MR GEORGE HAM**

Mailing Address **4304 S MILLS ST**

City **INDEPENDENCE** State **MO** Zip Code **64055**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **04 / 25 / 2016**

Transaction ID : **SA11AI.7076**

Amount of Each Receipt this Period **500.00**

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Kenneth Harvell**

Mailing Address **1775 Manning Way**

City **Colorado Springs** State **CO** Zip Code **80919**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Business Owner**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **06 / 08 / 2016**

Transaction ID : **SA11AI.10423**

Amount of Each Receipt this Period **250.00**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**LEE E HATTON**

Mailing Address **795 S KNOX DR**

City **PUEBLO** State **CO** Zip Code **81007**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **04 / 07 / 2016**

Transaction ID : **SA11AI.8114**

Amount of Each Receipt this Period **100.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**850.00**

201606170200199575

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. MRS FRANCISCA HENDERSON</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2016	
Mailing Address 122 N 82ND ST		Transaction ID : SA11A1.7605	
City MESA	State AZ	Zip Code 85207	
FEC ID number of contributing federal political committee. C [ ]		Amount of Each Receipt this Period [ ] 100.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date [ ] 202.00	
		<input type="checkbox"/> Contribution	

Full Name (Last, First, Middle Initial) <b>B. MR RICHARD L HOFFMAN</b>		Date of Receipt MM / DD / YYYY 05 / 23 / 2016	
Mailing Address 1300 N 550 E		Transaction ID : SA11A1.9471	
City COLUMBIA CITY	State IN	Zip Code 46725	
FEC ID number of contributing federal political committee. C [ ]		Amount of Each Receipt this Period [ ] 50.00	
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date [ ] 250.00	
		<input type="checkbox"/> Contribution	

Full Name (Last, First, Middle Initial) <b>C. Andrew Holloman</b>		Date of Receipt MM / DD / YYYY 04 / 25 / 2016	
Mailing Address 6910 Stockwell Drive		Transaction ID : SA11A1.6702	
City Colorado Springs	State CO	Zip Code 80922	
FEC ID number of contributing federal political committee. C [ ]		Amount of Each Receipt this Period [ ] 500.00	
Name of Employer American Family Insurance	Occupation Insurance Agent		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date [ ] 500.00	
		<input type="checkbox"/> Contribution	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	[ ] 650.00
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

201606170200199576



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.**

Full Name (Last, First, Middle Initial)  
**MR JOHN HOYT**

Mailing Address **31 CENTRAL ST**

City **RANDOLPH**      State **VT**      Zip Code **05060**

FEC ID number of contributing federal political committee.      **C**

Name of Employer      Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
**05 / 23 / 2016**

Transaction ID : **SA11AI.9678**

Amount of Each Receipt this Period  
**500.00**

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
**Mark Hyatt**

Mailing Address **15011 Cloudcross Court**

City **Colorado Springs**      State **CO**      Zip Code **80921**

FEC ID number of contributing federal political committee.      **C**

Name of Employer      Occupation  
**CEO**      **Denver Space Museum**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
**05 / 20 / 2016**

Transaction ID : **SA11AI.10372**

Amount of Each Receipt this Period  
**1000.00**

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
**MR WILLIAM IRVINE**

Mailing Address **703 AVENIDA PEQUENA**

City **SANTA BARBARA**      State **CA**      Zip Code **93111**

FEC ID number of contributing federal political committee.      **C**

Name of Employer      Occupation  
**Retired**      **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**201.00**

Date of Receipt  
**04 / 26 / 2016**

Transaction ID : **SA11AI.7276**

Amount of Each Receipt this Period  
**50.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1550.00**

201606170200199577

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>MRS DOROTHY JOHNSON</b>		Date of Receipt MM / DD / YYYY <b>05 / 11 / 2016</b>
Mailing Address <b>1421 PHILADELPHIA AVE APT 131</b>		Transaction ID : <b>SA11AI.9313</b>
City <b>CHAMBERSBURG</b>	State <b>PA</b>	Zip Code <b>17201</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>100.00</b>	
Name of Employer <b>Retired</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>MRS DOROTHY JOHNSON</b>		Date of Receipt MM / DD / YYYY <b>05 / 23 / 2016</b>
Mailing Address <b>1421 PHILADELPHIA AVE APT 131</b>		Transaction ID : <b>SA11AI.9314</b>
City <b>CHAMBERSBURG</b>	State <b>PA</b>	Zip Code <b>17201</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>100.00</b>	
Name of Employer <b>Retired</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>350.00</b>	

Full Name (Last, First, Middle Initial) <b>Mark Johnson</b>		Date of Receipt MM / DD / YYYY <b>05 / 27 / 2016</b>
Mailing Address <b>16 Vista Road</b>		Transaction ID : <b>SA11AI.8299</b>
City <b>Cherry Hills Village</b>	State <b>CO</b>	Zip Code <b>80113</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>250.00</b>	
Name of Employer <b>Self-Employed</b>	Occupation <b>Business Owner</b>	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>450.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199578

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial)

**Karen Jubach**

Mailing Address 25368 Creola Hue Road

City State Zip Code  
Credola OH 45622

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Consultant

Receipt For: 2016

Primary  General  
 Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

MM / DD / YYYY  
05 / 23 / 2016

Transaction ID : SA11AI.8216

Amount of Each Receipt this Period

2700.00

Contribution

Full Name (Last, First, Middle Initial)

**Tim Jubach**

Mailing Address 25368 Creola Hue Road

City State Zip Code  
Creola OH 45622

FEC ID number of contributing federal political committee.

C

Name of Employer  
Lean Enterprise, Inc.

Occupation  
Consultant

Receipt For: 2016

Primary  General  
 Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

MM / DD / YYYY  
05 / 23 / 2016

Transaction ID : SA11AI.8214

Amount of Each Receipt this Period

2700.00

Contribution

Full Name (Last, First, Middle Initial)

**MR GEORGE KAISER**

Mailing Address 18506 SE VILLAGE CIR

City State Zip Code  
TEQUESTA FL 33469

FEC ID number of contributing federal political committee.

C

Name of Employer  
NA

Occupation  
RETIRED

Receipt For: 2016

Primary  General  
 Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

MM / DD / YYYY  
04 / 18 / 2016

Transaction ID : SA11AI.7489

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

5500.00

**TOTAL** This Period (last page this line number only).....

201606170200199579

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 11d	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.**

Full Name (Last, First, Middle Initial)  
**MR DAVID J KELLER**

Mailing Address **PO BOX 2381**

City **BUCKLEY** State **WA** Zip Code **98321**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **05 / 16 / 2016**

Transaction ID : **SA11A1.9797**

Amount of Each Receipt this Period **100.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR WAYNE M KELLY**

Mailing Address **25275 LA LOMA DR**

City **LOS ALTOS** State **CA** Zip Code **94022**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **05 / 23 / 2016**

Transaction ID : **SA11A1.8863**

Amount of Each Receipt this Period **125.00**

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
**Mark Kiemele**

Mailing Address **2065 Mulligan Drive**

City **Colorado Springs** State **CO** Zip Code **80920**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Consultant**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **06 / 07 / 2016**

Transaction ID : **SA11A1.8370**

Amount of Each Receipt this Period **1000.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... **1225.00**

**TOTAL** This Period (last page this line number only).....

201606170200199580

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.** Full Name (Last, First, Middle Initial)  
**MR H KNAPHEIDE III**

Mailing Address **PO BOX 7140**

City **QUINCY** State **IL** Zip Code **62305**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **05 / 09 / 2016**

Transaction ID : **SA11AI.8680**

Amount of Each Receipt this Period **1000.00**

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Karl Kroeker**

Mailing Address **14510 Millhaven Place**

City **Colorado Springs** State **CO** Zip Code **80908**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Anesthesia Assoc of Colo Spgs Anesthesiologist**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **04 / 01 / 2016**

Transaction ID : **SA11AI.6670**

Amount of Each Receipt this Period **250.00**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**J.J. Leavy**

Mailing Address **5350 Alta Bahia Court**

City **San Diego** State **CA** Zip Code **92109**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Tara Investments owner**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **06 / 08 / 2016**

Transaction ID : **SA11AI.10713**

Amount of Each Receipt this Period **2700.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3950.00**

201606170200199581

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>Renee Leavy</b>		Date of Receipt MM / DD / YYYY <b>06 / 08 / 2016</b>
Mailing Address <b>5350 Alta Bahia Court</b>		Transaction ID : <b>SA11A1.10714</b>
City <b>San Diego</b>	State <b>CA</b>	Zip Code <b>92109</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2700.00</b>	
Name of Employer <b>Tara Invesmtenets LLC</b>	Occupation <b>owner</b>	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2700.00</b>	

Full Name (Last, First, Middle Initial) <b>MR RICHARD C MARX</b>		Date of Receipt MM / DD / YYYY <b>05 / 31 / 2016</b>
Mailing Address <b>PO BOX 440</b>		Transaction ID : <b>SA11A1.8428</b>
City <b>WAPPINGERS FALLS</b>	State <b>NY</b>	Zip Code <b>12590</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>100.00</b>	
Name of Employer <b>Retired</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>300.00</b>	

Full Name (Last, First, Middle Initial) <b>MRS JAMES MCMILLAN</b>		Date of Receipt MM / DD / YYYY <b>05 / 23 / 2016</b>
Mailing Address <b>15 CRYSTAL CANYON PL</b>		Transaction ID : <b>SA11A1.8740</b>
City <b>SPRING</b>	State <b>TX</b>	Zip Code <b>77389</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>100.00</b>	
Name of Employer	Occupation	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2900.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199582

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 11d	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.**

Full Name (Last, First, Middle Initial)  
**Richard Murrow**

Mailing Address **4722 High Forest Road**

City **Colorado Springs** State **CO** Zip Code **80908**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Business Consulting**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **06 / 07 / 2016**

Transaction ID : **SA11AI.8372**

Amount of Each Receipt this Period **1000.00**

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
**Michael Nelson**

Mailing Address **4610 Cautela Drive**

City **Westerville** State **OH** Zip Code **43081**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Nelson Tool Corp** Occupation **CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **05 / 11 / 2016**

Transaction ID : **SA11AI.6846**

Amount of Each Receipt this Period **1000.00**

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
**William Nettles**

Mailing Address **5871 S. Colorado Blvd**

City **Greenwood Village** State **CO** Zip Code **80121**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **05 / 05 / 2016**

Transaction ID : **SA11AI.6791**

Amount of Each Receipt this Period **500.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... **2500.00**

**TOTAL** This Period (last page this line number only).....

201606170200199583

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.** Full Name (Last, First, Middle Initial)  
**MR FRANK NOONAN**

Mailing Address **241 LOCUST AVE**

City **SAN RAFAEL** State **CA** Zip Code **94901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Saul Zaentz Company** Occupation **ACCOUNTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
**05 / 10 / 2016**

Transaction ID : **SA11AI.8872**

Amount of Each Receipt this Period  
**200.00**

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**MR EDMUND D O'LEARY**

Mailing Address **39 EASTWOOD CIRCUIT**

City **WEST ROXBURY** State **MA** Zip Code **02132**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
**05 / 20 / 2016**

Transaction ID : **SA11AI.8395**

Amount of Each Receipt this Period  
**100.00**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MISS EDITH P PALMER**

Mailing Address **282 LAROE RD**

City **CHESTER** State **NY** Zip Code **10918**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**06 / 06 / 2016**

Transaction ID : **SA11AI.10456**

Amount of Each Receipt this Period  
**1000.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1300.00**

201606170200199584



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 87
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>MR FLOYD PEDERSEN</b>		Date of Receipt MM / DD / YYYY 04 / 04 / 2016
Mailing Address PO BOX 871		Transaction ID : SA11AI.7202
City MARYSVILLE	State CA	Zip Code 95901
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer Floyd Pedersen Ventures	Occupation Owner	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>MR FLOYD PEDERSEN</b>		Date of Receipt MM / DD / YYYY 05 / 02 / 2016
Mailing Address PO BOX 871		Transaction ID : SA11AI.8891
City MARYSVILLE	State CA	Zip Code 95901
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer Floyd Pedersen Ventures	Occupation Owner	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) <b>MR FLOYD PEDERSEN</b>		Date of Receipt MM / DD / YYYY 06 / 06 / 2016
Mailing Address PO BOX 871		Transaction ID : SA11AI.10522
City MARYSVILLE	State CA	Zip Code 95901
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer Floyd Pedersen Ventures	Occupation Owner	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199585

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

A. Full Name (Last, First, Middle Initial) <b>MR CHARLES B POND III</b>		Date of Receipt MM / DD / YYYY <b>05 / 19 / 2016</b>
Mailing Address <b>PO BOX 1</b>		Transaction ID : <b>SA11A1.8489</b>
City <b>SUFFOLK</b>	State <b>VA</b>	Zip Code <b>23439</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>250.00</b>	
Name of Employer	Occupation	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

B. Full Name (Last, First, Middle Initial) <b>MR JACK RAMALEY</b>		Date of Receipt MM / DD / YYYY <b>05 / 31 / 2016</b>
Mailing Address <b>2295 DARTMOUTH AVE</b>		Transaction ID : <b>SA11A1.9071</b>
City <b>BOULDER</b>	State <b>CO</b>	Zip Code <b>80305</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>250.00</b>	
Name of Employer	Occupation	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

C. Full Name (Last, First, Middle Initial) <b>MRS TERESA A REGARD</b>		Date of Receipt MM / DD / YYYY <b>04 / 14 / 2016</b>
Mailing Address <b>720 E CHERRY LN</b>		Transaction ID : <b>SA11A1.7049</b>
City <b>ARLINGTON HEIGHTS</b>	State <b>IL</b>	Zip Code <b>60004</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>100.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>300.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199586

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

**A.** Full Name (Last, First, Middle Initial)  
MR JAMES A REMINGTON

Mailing Address 2300 CEDARFIELD PKWY APT 263

City State Zip Code  
HENRICO VA 23233

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
SELF RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2016

Transaction ID : SA11A1.8487

Amount of Each Receipt this Period  
1000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Randy Rush

Mailing Address 9125 Chetwood Drive

City State Zip Code  
Colorado Springs CO 80920

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Integrity Bank and Trust Banker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2016

Transaction ID : SA11A1.6692

Amount of Each Receipt this Period  
500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Daniel Santiago

Mailing Address 5743 Teller Street  
Apt 228

City State Zip Code  
Arvada CO 80002

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 06 / 2016

Transaction ID : SA11A1.6789

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

201606170200199587

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.**

Full Name (Last, First, Middle Initial)  
**NELSON SCHAENEN**

Mailing Address **56 MIDWOOD TER**

City **MADISON** State **NJ** Zip Code **09740**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **04 / 01 / 2016**

Transaction ID : **SA11A1.7430**

Amount of Each Receipt this Period **250.00**

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
**NELSON SCHAENEN**

Mailing Address **56 MIDWOOD TER**

City **MADISON** State **NJ** Zip Code **09740**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **06 / 02 / 2016**

Transaction ID : **SA11A1.10575**

Amount of Each Receipt this Period **250.00**

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
**Kim R Shugart**

Mailing Address **P.O. Box 2866**

City **Monument** State **CO** Zip Code **80132**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Consultant**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **04 / 13 / 2016**

Transaction ID : **SA11A1.6694**

Amount of Each Receipt this Period **2700.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... **3200.00**

**TOTAL** This Period (last page this line number only) .....

201606170200199588

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.** Full Name (Last, First, Middle Initial)  
**MR LEONARD SIGURDSEN**

Mailing Address **4169 W BIRCHVIEW RD**

City **GRASSTON** State **MN** Zip Code **55030**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF** Occupation **FARMER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **301.00**

Date of Receipt **05 / 16 / 2016**

Transaction ID : **SA11AI.9812**

Amount of Each Receipt this Period **250.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR WILLIAM B SNYDER**

Mailing Address **555 5TH AVE NE PH 2**

City **SAINT PETERSBURG** State **FL** Zip Code **33701**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **05 / 12 / 2016**

Transaction ID : **SA11AI.8549**

Amount of Each Receipt this Period **2700.00**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**MR WILLIAM B SNYDER**

Mailing Address **555 5TH AVE NE PH 2**

City **SAINT PETERSBURG** State **FL** Zip Code **33701**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **05 / 12 / 2016**

Transaction ID : **SA11AI.10709**

Amount of Each Receipt this Period **2300.00**

Contribution - Resignation/Reattribution request snet

**SUBTOTAL** of Receipts This Page (optional)..... **5250.00**

**TOTAL** This Period (last page this line number only).....

201606170200199589

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.**

Full Name (Last, First, Middle Initial)  
**MR HARRY B SPENCE**

Mailing Address **13048 SOMERSET DR**

City **GRASS VALLEY** State **CA** Zip Code **95945**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **04 / 26 / 2016**

Transaction ID : **SA11AI.7456**

Amount of Each Receipt this Period **500.00**

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
**Bill Stein**

Mailing Address **16645 Mystic Canyon Drive**

City **Monument** State **CO** Zip Code **80132**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Restaurant Owner**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **05 / 26 / 2016**

Transaction ID : **SA11AI.8297**

Amount of Each Receipt this Period **250.00**

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
**MRS MARGARET P THOMPSON**

Mailing Address **913 PARK BLVD W**

City **EAST LIVERPOOL** State **OH** Zip Code **43920**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **05 / 19 / 2016**

Transaction ID : **SA11AI.10052**

Amount of Each Receipt this Period **100.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... **850.00**

**TOTAL** This Period (last page this line number only).....

201606170200199590

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>MR D LESLIE TINDAL</b>		Date of Receipt MM / DD / YYYY <b>05 / 10 / 2016</b>
Mailing Address <b>1322 LES TINDAL RD</b>		Transaction ID : <b>SA11AI.8935</b>
City <b>PINEWOOD</b>	State <b>SC</b>	Zip Code <b>29125</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>MR D LESLIE TINDAL</b>		Date of Receipt MM / DD / YYYY <b>05 / 23 / 2016</b>
Mailing Address <b>1322 LES TINDAL RD</b>		Transaction ID : <b>SA11AI.8936</b>
City <b>PINEWOOD</b>	State <b>SC</b>	Zip Code <b>29125</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>500.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1500.00</b>	

Full Name (Last, First, Middle Initial) <b>MR HENRY TYROCH</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2016</b>
Mailing Address <b>7715 COLONY ST</b>		Transaction ID : <b>SA11AI.7638</b>
City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77036</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>200.00</b>	
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	<input type="checkbox"/> Contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>300.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199591

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLENE M WAGNER**

Mailing Address **12355 COLUMBINE CT**

City **THORNTON** State **CO** Zip Code **80241**

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 01 / 2016**

Transaction ID : **SA11AI.7238**

Amount of Each Receipt this Period  
**900.00**

Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Brian Ward**

Mailing Address **941 Ventana Court**

City **Windsor** State **CO** Zip Code **80550**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TEI** Occupation **Livestock**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 31 / 2016**

Transaction ID : **SA11AI.8323**

Amount of Each Receipt this Period  
**1000.00**

Contribution

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT P WHITEHILL**

Mailing Address **3435 S JASPER CT**

City **AURORA** State **CO** Zip Code **80013**

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 27 / 2016**

Transaction ID : **SA11AI.10366**

Amount of Each Receipt this Period  
**250.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2150.00**

201606170200199592



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 87  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN C WILLOX**

Mailing Address **1804 N SHIELDS ST**

City **FORT COLLINS** State **CO** Zip Code **80524**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **251.00**

Date of Receipt **MM / DD / YYYY**  
**05 / 27 / 2016**

Transaction ID : **SA11AI.10285**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt **MM / DD / YYYY**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt **MM / DD / YYYY**

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... **100.00**

**TOTAL** This Period (last page this line number only)..... **57830.00**

201606170200199593

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 87
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b
	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Absolute Resource Development</b>		Date of Disbursement MM / DD / YYYY 05 / 13 / 2016
Mailing Address 673 W. 78th Place		Amount of Each Disbursement this Period 3454.41 <input type="checkbox"/>
City Tulsa	State OK	
Zip Code 74132	Purpose of Disbursement Finance Consultant	Transaction ID : SB17.6866
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Absolute Resource Development</b>		Date of Disbursement MM / DD / YYYY 05 / 13 / 2016
Mailing Address 673 W. 78th Place		Amount of Each Disbursement this Period 737.17 <input type="checkbox"/>
City Tulsa	State OK	
Zip Code 74132	Purpose of Disbursement Travel Expense	Transaction ID : SB17.6868
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		Date of Disbursement MM / DD / YYYY 04 / 19 / 2016
Mailing Address P.O. Box 650448		Amount of Each Disbursement this Period 516.28 <input checked="" type="checkbox"/>
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement Personal American Express - see memo items	Transaction ID : SB17.6783
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	4191.58
TOTAL This Period (last page this line number only).....	

201606170200199594

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 650448

City State Zip Code  
Dallas TX 75265

Purpose of Disbursement  
Credit Card Payment

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 19 / 2016

Amount of Each Disbursement this Period

792.31

Transaction ID : SB17.8265

Full Name (Last, First, Middle Initial)

**B. Arbys**

Mailing Address 2221 W 6th

City State Zip Code  
Limon CO 80828

Purpose of Disbursement  
Travel Expense

002  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2016

Amount of Each Disbursement this Period

8.00

Transaction ID : SB17.6748

Full Name (Last, First, Middle Initial)

**C. Leslie Beers**

Mailing Address 2711 Templeton Gap Road

City State Zip Code  
Colorado Springs CO 80908

Purpose of Disbursement  
Clerical Support

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2016

Amount of Each Disbursement this Period

330.00

Transaction ID : SB17.8347

SUBTOTAL of Disbursements This Page (optional).....

330.00

TOTAL This Period (last page this line number only).....

201606170200199595

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Big Apple**

Mailing Address 2195 N State Hwy 83

City Franktown State CO Zip Code 80116

Purpose of Disbursement  
Travel Expense

002  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2016

Amount of Each Disbursement this Period

31.67

Transaction ID : SB17.6744

Full Name (Last, First, Middle Initial)

**B. ROBERT B BLAHA**

Mailing Address 14335 ROLLER COASTER ROAD

City COLORADO SPRINGS State CO Zip Code 80920

Purpose of Disbursement  
American Express payment - see memos

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: CO District:

Date of Disbursement

MM / DD / YYYY  
04 / 19 / 2016

Amount of Each Disbursement this Period

516.28

Transaction ID : SB17.6727

Full Name (Last, First, Middle Initial)

**C. ROBERT B BLAHA**

Mailing Address 14335 ROLLER COASTER ROAD

City COLORADO SPRINGS State CO Zip Code 80920

Purpose of Disbursement  
American Express Payment

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: CO District:

Date of Disbursement

MM / DD / YYYY  
05 / 19 / 2016

Amount of Each Disbursement this Period

792.31

Transaction ID : SB17.8264

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1308.59

201606170200199596

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 87			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21		

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Broomfield County Republicans</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2016
Mailing Address P.O. Box 0402		Amount of Each Disbursement this Period 206.98
City Broomfield	State CO	
Zip Code 80038	Purpose of Disbursement 2016 Lincoln Dinner	Transaction ID : SB17.6657
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Caging Corporation</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 504 Shaw Road Suite 217		Amount of Each Disbursement this Period 206.40
City Sterling	State VA	
Zip Code 20166	Purpose of Disbursement Indirect Program Expense: Caging & Escrow	Transaction ID : SB17.6807
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Caging Corporation</b>		Date of Disbursement MM / DD / YYYY 05 / 19 / 2016
Mailing Address 504 Shaw Road Suite 217		Amount of Each Disbursement this Period 275.77
City Sterling	State VA	
Zip Code 20166	Purpose of Disbursement Indirect Program Exp: Caging for March	Transaction ID : SB17.8362
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	689.15
TOTAL This Period (last page this line number only).....	

201606170200199597

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Capitol Caging Corporation**

Mailing Address 504 Shaw Road  
Suite 217

City Sterling State VA Zip Code 20166

Purpose of Disbursement  
Indirect Program Expense: Caging & Escrow

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 07 / 2016

Amount of Each Disbursement this Period

76.00

Transaction ID : SB17.10430

Full Name (Last, First, Middle Initial)

**B. Cenex-Grainland Cooperative**

Mailing Address 249 W. Denver Street

City Holyoke State CO Zip Code 80734

Purpose of Disbursement  
Travel Expense

002  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2016

Amount of Each Disbursement this Period

35.51

Transaction ID : SB17.6755

Full Name (Last, First, Middle Initial)

**C. Colfax Food & Gas**

Mailing Address 1895 E. Colfax Ave

City Denver State CO Zip Code 80218

Purpose of Disbursement  
Travel Expense

002  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 06 / 2016

Amount of Each Disbursement this Period

33.85

Transaction ID : SB17.8267

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

76.00

201606170200199598

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Colorado Republican Committee**

Mailing Address 5950 S. Willow Drive  
Ste 210

City Greenwood Village State CO Zip Code 80111

Purpose of Disbursement  
Centennial Dinner

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 04 / 2016

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17.6636

Full Name (Last, First, Middle Initial)

**B. Colorado Republican Committee**

Mailing Address 5950 S. Willow Drive  
Ste 210

City Greenwood Village State CO Zip Code 80111

Purpose of Disbursement  
Guest Badge Assembly

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 04 / 2016

Amount of Each Disbursement this Period

405.00

Transaction ID : SB17.6637

Full Name (Last, First, Middle Initial)

**C. Conoco**

Mailing Address 9215 E. Lincoln Ave

City LoneTree State CO Zip Code 80124

Purpose of Disbursement  
Travel Expense

002  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2016

Amount of Each Disbursement this Period

43.73

Transaction ID : SB17.8288

SUBTOTAL of Disbursements This Page (optional).....

805.00

TOTAL This Period (last page this line number only).....

201606170200199599

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Consolidated Mailing Services**

Mailing Address 504 Shaw Road  
Suite 206

City Sterling State VA Zip Code 20166

Purpose of Disbursement  
Direct Mail Program: Printing & Mailshop

003  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2016

Amount of Each Disbursement this Period

4034.89

Transaction ID : SB17.6825

Full Name (Last, First, Middle Initial)

**B. Consolidated Mailing Services**

Mailing Address 504 Shaw Road  
Suite 206

City Sterling State VA Zip Code 20166

Purpose of Disbursement  
Direct Mail: Printing & Mailshop

003  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 19 / 2016

Amount of Each Disbursement this Period

9292.49

Transaction ID : SB17.8364

Full Name (Last, First, Middle Initial)

**c. Cycle A&M**

Mailing Address 1700 Lincoln Street

City Denver State CO Zip Code 80203

Purpose of Disbursement  
Petition Expense

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2016

Amount of Each Disbursement this Period

33447.00

Transaction ID : SB17.4489

SUBTOTAL of Disbursements This Page (optional).....

46774.38

TOTAL This Period (last page this line number only).....

201606170200199600



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Direct Support Services**

Mailing Address 1155-15th Street  
Suite 410

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Direct Mail Program: Postage

001  
 002  
 003  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2016

Amount of Each Disbursement this Period

2180.13

Transaction ID : SB17.6805

**B. Direct Support Services**

Mailing Address 1155-15th Street  
Suite 410

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Direct Mail Program: Postage

001  
 002  
 003  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2016

Amount of Each Disbursement this Period

44292.16

Transaction ID : SB17.6806

**C. Direct Support Services**

Mailing Address 1155-15th Street  
Suite 410

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Direct Mail Program: Postage

001  
 002  
 003  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2016

Amount of Each Disbursement this Period

6923.60

Transaction ID : SB17.6817

SUBTOTAL of Disbursements This Page (optional).....

53395.89

TOTAL This Period (last page this line number only).....

201606170200199601

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 87
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Direct Support Services</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 1155-15th Street Suite 410		Amount of Each Disbursement this Period 10352.83 <input type="checkbox"/>
City Washington	State DC	
Purpose of Disbursement Direct Mail Program: Postage		Transaction ID : SB17.6824
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Category/Type 003
State:	District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) <b>B. Direct Support Systems, Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 4095 River Forth Drive		Amount of Each Disbursement this Period 2120.20 <input type="checkbox"/>
City Fairfax	State VA	
Purpose of Disbursement Direct Mail Program: Data Processing		Transaction ID : SB17.6808
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Category/Type 003
State:	District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) <b>C. Direct Support Systems, Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address 4095 River Forth Drive		Amount of Each Disbursement this Period 1059.93 <input type="checkbox"/>
City Fairfax	State VA	
Purpose of Disbursement Direct Mail Program: Data Processing		Transaction ID : SB17.6818
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Category/Type 003
State:	District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13532.96
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199602

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Direct Support Systems, Inc.**

Mailing Address 4095 River Forth Drive

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
Direct Mail Program: Data Processing

001  
 002  
 003  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 19 / 2016

Amount of Each Disbursement this Period

102.55

Transaction ID : SB17.8365

Full Name (Last, First, Middle Initial)

**B. Donor Precision, LLC/DonorBureau**

Mailing Address 1900 N. Culpeper Street

City Arlington State VA Zip Code 22207

Purpose of Disbursement  
Direct Mail Program: Printing & Mailshop

001  
 002  
 003  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2016

Amount of Each Disbursement this Period

661.10

Transaction ID : SB17.6810

Full Name (Last, First, Middle Initial)

**C. Donor Precision, LLC/DonorBureau**

Mailing Address 1900 N. Culpeper Street

City Arlington State VA Zip Code 22207

Purpose of Disbursement  
Direct Mail Program: Printing & Mailshop

001  
 002  
 003  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2016

Amount of Each Disbursement this Period

252.72

Transaction ID : SB17.6819

SUBTOTAL of Disbursements This Page (optional).....

1016.37

TOTAL This Period (last page this line number only).....

201606170200199603

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial)

**A. Exxon Mobile**

Mailing Address 5959 Las Colinas Blvd

Date of Disbursement

M M / D D / Y Y Y Y Y
03 / 05 / 2016

City State Zip Code  
Irving TX 75039

Amount of Each Disbursement this Period

28.03
-------

Purpose of Disbursement  
Travel Expense

002
-----

Candidate Name

Category/  
Type

Transaction ID : SB17.6733

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Facebook**

Mailing Address 1601 S. California Ave

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 02 / 2016

City State Zip Code  
Palo Alto CA 94304

Amount of Each Disbursement this Period

162.46
--------

Purpose of Disbursement  
Social Media Advertising

004
-----

Candidate Name

Category/  
Type

Transaction ID : SB17.6831

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. Facebook**

Mailing Address 1601 S. California Ave

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 20 / 2016

City State Zip Code  
Palo Alto CA 94304

Amount of Each Disbursement this Period

500.12
--------

Purpose of Disbursement  
Social Media Ads

004
-----

Candidate Name

Category/  
Type

Transaction ID : SB17.8207

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

662.58
--------

TOTAL This Period (last page this line number only).....

--

201606170200199604

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 OF 87

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Facebook**

Mailing Address 1601 S. California Ave

City Palo Alto State CA Zip Code 94304

Purpose of Disbursement  
Social Media Ads

004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 21 / 2016

Amount of Each Disbursement this Period

500.97

Transaction ID : SB17.8222

**B. Facebook**

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S. California Ave

City Palo Alto State CA Zip Code 94304

Purpose of Disbursement  
Social Media Ads

004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2016

Amount of Each Disbursement this Period

500.41

Transaction ID : SB17.8359

**C. Facebook**

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S. California Ave

City Palo Alto State CA Zip Code 94304

Purpose of Disbursement  
Social Media Ads

004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2016

Amount of Each Disbursement this Period

51.14

Transaction ID : SB17.10427

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1052.52

201606170200199605

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 87			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2016
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 1.49
City Palo Alto	State CA	
Purpose of Disbursement Social Media Ads	Category/ Type 004	Transaction ID : SB17.10396
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2016
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 498.88
City Palo Alto	State CA	
Purpose of Disbursement Social Media Ads	Category/ Type 004	Transaction ID : SB17.10399
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Facebook</b>		Date of Disbursement MM / DD / YYYY 06 / 07 / 2016
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 2.47
City Palo Alto	State CA	
Purpose of Disbursement Social Media Ads	Category/ Type 004	Transaction ID : SB17.10401
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	502.84
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199606

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 OF 87

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Facebook**

Mailing Address 1601 S. California Ave

City Palo Alto State CA Zip Code 94304

Purpose of Disbursement  
Social Media Ads

004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Date of Disbursement

MM / DD / YYYY  
06 / 07 / 2016

Amount of Each Disbursement this Period

2.86

Transaction ID : SB17.10402

Full Name (Last, First, Middle Initial)

**B. Facebook**

Mailing Address 1601 S. California Ave

City Palo Alto State CA Zip Code 94304

Purpose of Disbursement  
Social Media Ads

004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Date of Disbursement

MM / DD / YYYY  
06 / 07 / 2016

Amount of Each Disbursement this Period

12.93

Transaction ID : SB17.10403

Full Name (Last, First, Middle Initial)

**C. Facebook**

Mailing Address 1601 S. California Ave

City Palo Alto State CA Zip Code 94304

Purpose of Disbursement  
Social Media Ads

004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Date of Disbursement

MM / DD / YYYY  
06 / 07 / 2016

Amount of Each Disbursement this Period

498.71

Transaction ID : SB17.10406

SUBTOTAL of Disbursements This Page (optional).....

514.50

TOTAL This Period (last page this line number only).....

201606170200199607

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Facebook**

Mailing Address 1601 S. California Ave

Date of Disbursement

MM / DD / YYYY  
06 / 07 / 2016

City State Zip Code  
Palo Alto CA 94304

Amount of Each Disbursement this Period

504.64

Purpose of Disbursement  
Social Media Ads

004

Candidate Name

Category/  
Type

Transaction ID : SB17.10407

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Facebook**

Mailing Address 1601 S. California Ave

Date of Disbursement

MM / DD / YYYY  
06 / 08 / 2016

City State Zip Code  
Palo Alto CA 94304

Amount of Each Disbursement this Period

1.58

Purpose of Disbursement  
Social Media Ads

004

Candidate Name

Category/  
Type

Transaction ID : SB17.10408

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. Facebook**

Mailing Address 1601 S. California Ave

Date of Disbursement

MM / DD / YYYY  
06 / 08 / 2016

City State Zip Code  
Palo Alto CA 94304

Amount of Each Disbursement this Period

6.17

Purpose of Disbursement  
Social Media Ads

004

Candidate Name

Category/  
Type

Transaction ID : SB17.10409

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

512.39

TOTAL This Period (last page this line number only).....

201606170200199608



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>		Date of Disbursement MM / DD / YYYY 06 / 08 / 2016
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 13.29
City Palo Alto	State CA	
Zip Code 94304	Purpose of Disbursement Social Media Ads	Transaction ID : SB17.10410
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement MM / DD / YYYY 05 / 11 / 2016
Mailing Address P.O. Box 94515		Amount of Each Disbursement this Period 60.11
City Palatine	State IL	
Zip Code 60094	Purpose of Disbursement Postage	Transaction ID : SB17.6878
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. First Virginia Community Bank</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 11325 Random Hills Road		Amount of Each Disbursement this Period 61.11
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Bank Charges	Transaction ID : SB17.6812
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	134.51
TOTAL This Period (last page this line number only).....	

201606170200199609

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 87	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. First Virginia Community Bank</b>		Date of Disbursement MM / DD / YYYY 04 / 06 / 2016
Mailing Address 11325 Random Hills Road		Amount of Each Disbursement this Period 49.00
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Bank Charges	Transaction ID : SB17.6813
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. First Virginia Community Bank</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2016
Mailing Address 11325 Random Hills Road		Amount of Each Disbursement this Period 772.92
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Bank Charges	Transaction ID : SB17.6814
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. First Virginia Community Bank</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 11325 Random Hills Road		Amount of Each Disbursement this Period 15.00
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Bank Charges	Transaction ID : SB17.6815
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	836.92
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199610

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 51 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. First Virginia Community Bank**

Mailing Address 11325 Random Hills Road

City State Zip Code  
Fairfax VA 22030

Purpose of Disbursement  
Bank Charges/Credit Card Fees

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 06 / 2016

Amount of Each Disbursement this Period

458.45

Transaction ID : SB17.8361

**B. First Virginia Community Bank**

Mailing Address 11325 Random Hills Road

City State Zip Code  
Fairfax VA 22030

Purpose of Disbursement  
Service Charge

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2016

Amount of Each Disbursement this Period

133.59

Transaction ID : SB17.10428

**C. First Virginia Community Bank**

Mailing Address 11325 Random Hills Road

City State Zip Code  
Fairfax VA 22030

Purpose of Disbursement  
Monthly Bank Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 06 / 2016

Amount of Each Disbursement this Period

67.50

Transaction ID : SB17.10429

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

659.54

201606170200199611

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Flatiron**

Mailing Address 44 W. Flatiron Crossing

Date of Disbursement

M M / D D / Y Y Y Y
04 / 22 / 2016

City State Zip Code  
Broomfield CO 80021

Amount of Each Disbursement this Period

36.52
-------

Purpose of Disbursement  
Travel Expense

002
-----

Candidate Name

Category/  
Type

Transaction ID : SB17.8271

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Elise Forte**

Mailing Address 8745 Windfall Way

Date of Disbursement

M M / D D / Y Y Y Y
05 / 23 / 2016

City State Zip Code  
Colorado Springs CO 80908

Amount of Each Disbursement this Period

215.00
--------

Purpose of Disbursement  
Clerical Support

001
-----

Candidate Name

Category/  
Type

Transaction ID : SB17.8233

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. Elise Forte**

Mailing Address 8745 Windfall Way

Date of Disbursement

M M / D D / Y Y Y Y
05 / 27 / 2016

City State Zip Code  
Colorado Springs CO 80908

Amount of Each Disbursement this Period

158.50
--------

Purpose of Disbursement  
Clerical Support

001
-----

Candidate Name

Category/  
Type

Transaction ID : SB17.8292

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

373.50
--------

TOTAL This Period (last page this line number only).....

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201606170200199612

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

**A. Google, Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address 1600 Amphitheatre Parkway

City Mountain View    State CA    Zip Code 94043

Purpose of Disbursement Social Media Ads     004

Candidate Name    Category/Type

Office Sought:  House     Senate     President    Disbursement For: 2016  
 Primary     General  
 Other (specify)

State:    District:

Date of Disbursement: MM / DD / YYYY  
06 / 06 / 2016

Amount of Each Disbursement this Period: 680.00

Transaction ID : SB17.10400

**B. Google, Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address 1600 Amphitheatre Parkway

City Mountain View    State CA    Zip Code 94043

Purpose of Disbursement Social Media Ads     004

Candidate Name    Category/Type

Office Sought:  House     Senate     President    Disbursement For: 2016  
 Primary     General  
 Other (specify)

State:    District:

Date of Disbursement: MM / DD / YYYY  
06 / 07 / 2016

Amount of Each Disbursement this Period: 50.00

Transaction ID : SB17.10404

**C. Google, Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address 1600 Amphitheatre Parkway

City Mountain View    State CA    Zip Code 94043

Purpose of Disbursement Social Media Ads     004

Candidate Name    Category/Type

Office Sought:  House     Senate     President    Disbursement For: 2016  
 Primary     General  
 Other (specify)

State:    District:

Date of Disbursement: MM / DD / YYYY  
06 / 07 / 2016

Amount of Each Disbursement this Period: 200.00

Transaction ID : SB17.10405

**SUBTOTAL** of Disbursements This Page (optional) ..... 930.00

**TOTAL** This Period (last page this line number only) .....

201606170200199613

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 54 OF 87	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Google, Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 08 / 2016
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 350.00
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Social Media Ads	Transaction ID : SB17.10413
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Henry's Pub</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address 234 E. 4th Street		Amount of Each Disbursement this Period 88.36
City Loveland	State CO	
Zip Code 80537	Purpose of Disbursement Meals and Entertainment	Transaction ID : SB17.6752
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Holiday Inn Express</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2016
Mailing Address 1391 S. Townsend Ave		Amount of Each Disbursement this Period 107.76
City Montrose	State CO	
Zip Code 81401	Purpose of Disbursement Travel Expense	Transaction ID : SB17.6735
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

201606170200199614

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 87	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Il Bistro Italiano</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2016
Mailing Address 400 Main Street		Amount of Each Disbursement this Period 60.57 <input checked="" type="checkbox"/>
City Grand Junction	State CO	
Zip Code 81501	Purpose of Disbursement Meals/Travel Expense	Transaction ID : SB17.8277
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. Jack Quinns</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2016
Mailing Address 21 S. Tejon		Amount of Each Disbursement this Period 25.00 <input checked="" type="checkbox"/>
City Colorado Springs	State CO	
Zip Code 80903	Purpose of Disbursement Meals	Transaction ID : SB17.8269
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>c. Johnson Corner</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 2842 SE Frontage Road		Amount of Each Disbursement this Period 31.46 <input checked="" type="checkbox"/>
City Johnstown	State CO	
Zip Code 80534	Purpose of Disbursement Travel Expense	Transaction ID : SB17.8275
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201606170200199615

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Kneaders**

Mailing Address 13482 Bass Pro Drive

City Colorado Springs State CO Zip Code 80920

Purpose of Disbursement  
Meals - Staff

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 04 / 2016

Amount of Each Disbursement this Period

12.63

Transaction ID : SB17.8266

**B. LCRP**

Mailing Address 4020 S. College Ave

City Fort Collins State CO Zip Code 80525

Purpose of Disbursement  
Lincoln Day Dinner

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 07 / 2016

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.10387

**c. Legacy Lists, Inc.**

Mailing Address 1155 - 15th Street  
Suite 410

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Direct Mail Program:List Rental Expense

003  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 21 / 2016

Amount of Each Disbursement this Period

4442.63

Transaction ID : SB17.6821

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

4692.63

201606170200199616



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 87			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Legacy Lists, Inc.</b>		Date of Disbursement MM / DD / YYYY <b>04 / 21 / 2016</b>
Mailing Address <b>1155 - 15th Street Suite 410</b>		Amount of Each Disbursement this Period <b>465.71</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20005</b>	Purpose of Disbursement <b>Direct Mail Program: List Rental Exps</b>	
Candidate Name	Category/Type <b>003</b>	Transaction ID : <b>SB17.6822</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Legacy Lists, Inc.</b>		Date of Disbursement MM / DD / YYYY <b>05 / 19 / 2016</b>
Mailing Address <b>1155 - 15th Street Suite 410</b>		Amount of Each Disbursement this Period <b>4367.13</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20005</b>	Purpose of Disbursement <b>Direct Mail Program: List Rental Expense</b>	
Candidate Name	Category/Type <b>003</b>	Transaction ID : <b>SB17.8366</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Marriott</b>		Date of Disbursement MM / DD / YYYY <b>03 / 16 / 2016</b>
Mailing Address <b>775 12th Street</b>		Amount of Each Disbursement this Period <b>62.75</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20005</b>	Purpose of Disbursement <b>Travel Expense</b>	
Candidate Name	Category/Type <b>002</b>	Transaction ID : <b>SB17.6742</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4832.84</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199617

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 87	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Mine Shack Car Wash</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2016
Mailing Address 2554 Woodgate Road		Amount of Each Disbursement this Period 8.00 <input checked="" type="checkbox"/>
City Montrose	State CO	
Zip Code 81401	Purpose of Disbursement Travel Expense	Transaction ID : SB17.6731
Candidate Name	Category/ Type 002	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Minuteman Press</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2016
Mailing Address 6870 N Academy Blvd		Amount of Each Disbursement this Period 476.35 <input type="checkbox"/>
City Colorado Springs	State CO	
Zip Code 80918	Purpose of Disbursement Palm Cards	Transaction ID : SB17.6650
Candidate Name	Category/ Type 003	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MRD Law</b>		Date of Disbursement MM / DD / YYYY 04 / 29 / 2016
Mailing Address 3301 W. Clyde Place		Amount of Each Disbursement this Period 15000.00 <input type="checkbox"/>
City Denver	State CO	
Zip Code 80211	Purpose of Disbursement Legal Expense	Transaction ID : SB17.6773
Candidate Name	Category/ Type 001	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15476.35
TOTAL This Period (last page this line number only).....	

201606170200199618

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. MRD Law**

Mailing Address 3301 W. Clyde Place

City State Zip Code  
Denver CO 80211

Purpose of Disbursement  
Legal Expense

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 27 / 2016

Amount of Each Disbursement this Period

17381.25

Transaction ID : SB17.8247

**B. New Sheridan Chop House**

Mailing Address 233 W. Colorado Ave

City State Zip Code  
Telluride CO 81435

Purpose of Disbursement  
Travel Expense

002  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2016

Amount of Each Disbursement this Period

16.50

Transaction ID : SB17.6737

**C. Northwest Parkway**

Mailing Address 3701 Northwest Parkway

City State Zip Code  
Broomfield CO 80023

Purpose of Disbursement  
Travel Expense

002  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2016

Amount of Each Disbursement this Period

4.75

Transaction ID : SB17.8290

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

17381.25

201606170200199619

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Phoenix Promotional Products**

Mailing Address 909 Senate Ave

Date of Disbursement

MM / DD / YYYY  
05 / 16 / 2016

City State Zip Code  
Red Oak IL 51566

Amount of Each Disbursement this Period

112.09

Purpose of Disbursement  
Campaign Items - Java

004

Candidate Name

Category/  
Type

Transaction ID : SB17.8194

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) Runoff

Full Name (Last, First, Middle Initial)

**B. Phoenix Promotional Products**

Mailing Address 909 Senate Ave

Date of Disbursement

MM / DD / YYYY  
05 / 16 / 2016

City State Zip Code  
Red Oak IL 51566

Amount of Each Disbursement this Period

256.58

Purpose of Disbursement  
Campaign Material - Cups

004

Candidate Name

Category/  
Type

Transaction ID : SB17.8195

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

Full Name (Last, First, Middle Initial)

**c. Kathryn L Price**

Mailing Address 608 N Nevada Ave  
#4

Date of Disbursement

MM / DD / YYYY  
04 / 29 / 2016

City State Zip Code  
Colorado Springs CO 80903

Amount of Each Disbursement this Period

4500.00

Purpose of Disbursement  
Campaign Manager

001

Candidate Name

Category/  
Type

Transaction ID : SB17.6772

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify)

SUBTOTAL of Disbursements This Page (optional).....

4868.67

TOTAL This Period (last page this line number only).....

201606170200199620

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 87			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Kathryn L Price</b>		Date of Disbursement MM / DD / YYYY 05 / 12 / 2016
Mailing Address 608 N Nevada Ave #4		Amount of Each Disbursement this Period 4500.00 <input type="checkbox"/>
City Colorado Springs	State CO	
Purpose of Disbursement Campaign Manager	<input type="checkbox"/> 001 Category/ Type	Transaction ID : SB17.8225
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amanda L Puskar</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2016
Mailing Address 1323 N. Tejon		Amount of Each Disbursement this Period 580.00 <input type="checkbox"/>
City Colorado Springs	State CO	
Purpose of Disbursement Clerical Support	<input type="checkbox"/> 001 Category/ Type	Transaction ID : SB17.6653
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Amanda L Puskar</b>		Date of Disbursement MM / DD / YYYY 04 / 29 / 2016
Mailing Address 1323 N. Tejon		Amount of Each Disbursement this Period 595.00 <input type="checkbox"/>
City Colorado Springs	State CO	
Purpose of Disbursement Clerical Support	<input type="checkbox"/> 001 Category/ Type	Transaction ID : SB17.6770
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5675.00
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199621

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 87
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b
	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Amanda L Puskar</b>		Date of Disbursement MM / DD / YYYY 05 / 12 / 2016
Mailing Address 1323 N. Tejon		Amount of Each Disbursement this Period 652.60
City Colorado Springs	State CO	
Zip Code 80903	Purpose of Disbursement Clerical Support	Transaction ID : SB17.8224
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. Amanda L Puskar</b>		Date of Disbursement MM / DD / YYYY 05 / 23 / 2016
Mailing Address 1323 N. Tejon		Amount of Each Disbursement this Period 320.00
City Colorado Springs	State CO	
Zip Code 80903	Purpose of Disbursement Clerical Support	Transaction ID : SB17.8232
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. Rembolt Ludtke LLP</b>		Date of Disbursement MM / DD / YYYY 05 / 13 / 2016
Mailing Address 1128 Lincoln Mall Suite 300		Amount of Each Disbursement this Period 79.50
City Lincoln	State NE	
Zip Code 68508	Purpose of Disbursement Legal Services	Transaction ID : SB17.6871
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1052.10
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199622

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Rockslide Restaurant**

Mailing Address 401 Main Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2016

City State Zip Code  
Grand Junction CO 81501

Amount of Each Disbursement this Period

62.10
-------

Purpose of Disbursement  
Meals/Travel Expense

002
-----

Candidate Name

Category/  
Type

Transaction ID : SB17.8279

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Safeway Fuel**

Mailing Address 620 W. Platte Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2016

City State Zip Code  
Fort Morgan CO 80701

Amount of Each Disbursement this Period

35.80
-------

Purpose of Disbursement  
Travel Expense

002
-----

Candidate Name

Category/  
Type

Transaction ID : SB17.6740

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. Saltgrass**

Mailing Address 1405 Jamboree

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2016

City State Zip Code  
Colorado Springs CO 80920

Amount of Each Disbursement this Period

25.98
-------

Purpose of Disbursement  
Meals and Entertainment

001
-----

Candidate Name

Category/  
Type

Transaction ID : SB17.6750

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional) .....

0.00
------

TOTAL This Period (last page this line number only) .....

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201606170200199623

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial) <b>A. San Luis Valley Brewing Company</b>		Date of Disbursement MM / DD / YYYY 03 / 04 / 2016
Mailing Address 631 Main Street		Amount of Each Disbursement this Period 23.40 <input checked="" type="checkbox"/>
City Alamosa	State CO	
Zip Code 81101	Purpose of Disbursement Travel Expense	Transaction ID : SB17.6729
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. Shell</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2016
Mailing Address 1046 East Rainbow Blvd		Amount of Each Disbursement this Period 30.50 <input checked="" type="checkbox"/>
City Salida	State CO	
Zip Code 81201	Purpose of Disbursement Travel Expense	Transaction ID : SB17.6739
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. Shell</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2016
Mailing Address 1046 East Rainbow Blvd		Amount of Each Disbursement this Period 34.97 <input checked="" type="checkbox"/>
City Salida	State CO	
Zip Code 81201	Purpose of Disbursement Travel expense	Transaction ID : SB17.8285
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201606170200199624



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 87			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Shell</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2016
Mailing Address 1046 East Rainbow Blvd		Amount of Each Disbursement this Period 12.99
City Salida	State CO	
Purpose of Disbursement Travel Expense	Candidate Name	Category/ Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: _____	District: _____	Transaction ID : SB17.8286

Full Name (Last, First, Middle Initial) <b>B. Simpkins Escrow LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 29243 St Just Drive		Amount of Each Disbursement this Period 211.85
City Unionville	State VA	
Purpose of Disbursement Indirect Program Expense: Caging & Escrow	Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: _____	District: _____	Transaction ID : SB17.6811

Full Name (Last, First, Middle Initial) <b>C. Simpkins Escrow LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 19 / 2016
Mailing Address 29243 St Just Drive		Amount of Each Disbursement this Period 270.85
City Unionville	State VA	
Purpose of Disbursement Indirect Program Expense: Caging & Escrow	Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: _____	District: _____	Transaction ID : SB17.8367

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	482.70
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199625

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 87			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Smart Media Group, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 11 / 2016
Mailing Address 1427 Leslie Avenue		Amount of Each Disbursement this Period 26088.00
City Alexandria	State VA	
Zip Code 22301	Purpose of Disbursement Media Purchase	Transaction ID : SB17.8227
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. Smart Media Group, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2016
Mailing Address 1427 Leslie Avenue		Amount of Each Disbursement this Period 66796.00
City Alexandria	State VA	
Zip Code 22301	Purpose of Disbursement Media Buy	Transaction ID : SB17.8231
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. Smart Media Group, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2016
Mailing Address 1427 Leslie Avenue		Amount of Each Disbursement this Period 66796.00
City Alexandria	State VA	
Zip Code 22301	Purpose of Disbursement Media Buy	Transaction ID : SB17.8244
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	159680.00
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199626

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 87
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Smart Media Group, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2016
Mailing Address 1427 Leslie Avenue		Amount of Each Disbursement this Period 60286.50
City Alexandria	State VA	
Zip Code 22301	Purpose of Disbursement Media Buy	Transaction ID : SB17.8343
Candidate Name	Category/ Type 004	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Smart Media Group, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 08 / 2016
Mailing Address 1427 Leslie Avenue		Amount of Each Disbursement this Period 54723.76
City Alexandria	State VA	
Zip Code 22301	Purpose of Disbursement Media Buy	Transaction ID : SB17.10414
Candidate Name	Category/ Type 004	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SpringHill Suites</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 236 Main Street		Amount of Each Disbursement this Period 340.90
City Grand Junction	State CO	
Zip Code 81501	Purpose of Disbursement Travel Expense	Transaction ID : SB17.8282
Candidate Name	Category/ Type 002	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	115010.26
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199627

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 87			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Strategic Perception, Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016	
Mailing Address 6158 Mulholland Highway		Amount of Each Disbursement this Period 3000.00	
City Hollywood	State CA	Zip Code 90068	Category/ Type 004
Purpose of Disbursement Media Consultation Fee			
Candidate Name		Transaction ID : SB17.6625	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Strategic Perception, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2016	
Mailing Address 6158 Mulholland Highway		Amount of Each Disbursement this Period 5017.15	
City Hollywood	State CA	Zip Code 90068	Category/ Type 004
Purpose of Disbursement Media Consulting Expense			
Candidate Name		Transaction ID : SB17.6798	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Strategic Perception, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 13 / 2016	
Mailing Address 6158 Mulholland Highway		Amount of Each Disbursement this Period 10950.00	
City Hollywood	State CA	Zip Code 90068	Category/ Type 004
Purpose of Disbursement Post Production Expense			
Candidate Name		Transaction ID : SB17.8228	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	18967.15
<b>TOTAL</b> This Period (last page this line number only) .....	

201606170200199628

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 87			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Strategic Perception, Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016	
Mailing Address 6158 Mulholland Highway		Amount of Each Disbursement this Period 5000.00	
City Hollywood	State CA	Zip Code 90068	Category/ Type 004
Purpose of Disbursement Media Consulting			
Candidate Name		Transaction ID : SB17.8344	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Strategic Perception, Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2016	
Mailing Address 6158 Mulholland Highway		Amount of Each Disbursement this Period 2435.62	
City Hollywood	State CA	Zip Code 90068	Category/ Type 004
Purpose of Disbursement Production Costs			
Candidate Name		Transaction ID : SB17.8345	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Subway</b>		Date of Disbursement MM / DD / YYYY 03 / 19 / 2016	
Mailing Address 2195 CO 83		Amount of Each Disbursement this Period 6.24	
City Franktown	State CO	Zip Code 80116	Category/ Type 002
Purpose of Disbursement Travel Expense			
Candidate Name		Transaction ID : SB17.6746	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7435.62
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199629

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 87
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19a <input type="checkbox"/> 19b <input type="checkbox"/> 20a <input type="checkbox"/> 20b <input type="checkbox"/> 20c <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Michael Sweet (Epitage Media)</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 4868 S. Meadow Lark Drive		Amount of Each Disbursement this Period 1025.00
City Castle Rock	State CO	Zip Code 80109
Purpose of Disbursement Production Costs	Category/ Type 004	Transaction ID : SB17.4485
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:                  District:		

Full Name (Last, First, Middle Initial) <b>B. Taco John's</b>		Date of Disbursement MM / DD / YYYY 03 / 20 / 2016
Mailing Address 7605 Royal Vista Road		Amount of Each Disbursement this Period 7.78
City Ft Collins	State CO	Zip Code 80525
Purpose of Disbursement Travel Expense	Category/ Type 002	Transaction ID : SB17.6753
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:                  District:		

Full Name (Last, First, Middle Initial) <b>C. The Cruise Authority</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2016
Mailing Address 1760 Powers Ferry Road		Amount of Each Disbursement this Period 259.35
City Marietta	State GA	Zip Code 30067
Purpose of Disbursement Weekly Standard Summit 2016	Category/ Type 001	Transaction ID : SB17.6651
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:                  District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1284.35
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199630

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 71 OF 87

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. The Party of Choice**

Mailing Address P.O. Box 460243

City Aurora State CO Zip Code 80046

Purpose of Disbursement  
Communication Support

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2016

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.8235

Full Name (Last, First, Middle Initial)

**B. The Party of Choice**

Mailing Address P.O. Box 460243

City Aurora State CO Zip Code 80046

Purpose of Disbursement  
Media Consulting

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2016

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.8348

Full Name (Last, First, Middle Initial)

**c. The Stationery Studio**

Mailing Address 975 Weiland Road  
Suite 250

City Buffalo Grove State IL Zip Code 60089

Purpose of Disbursement  
Business Expense

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 24 / 2016

Amount of Each Disbursement this Period

61.90

Transaction ID : SB17.8283

SUBTOTAL of Disbursements This Page (optional).....

2000.00

TOTAL This Period (last page this line number only).....

201606170200199631

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 87
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Transaxt</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2016
Mailing Address 190 Monroe Ave NW Ste 500		Amount of Each Disbursement this Period 66.40
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement Credit Card Charges	Transaction ID : SB17.6669
Candidate Name	001 Category/Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Transaxt</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2016
Mailing Address 190 Monroe Ave NW Ste 500		Amount of Each Disbursement this Period 39.89
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement Bank charges/Credit Card Fees	Transaction ID : SB17.10377
Candidate Name	003 Category/Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Transaxt</b>		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address 190 Monroe Ave NW Ste 500		Amount of Each Disbursement this Period 11.93
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement Bank Charges/Credit Card Fees	Transaction ID : SB17.10378
Candidate Name	003 Category/Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	118.22
TOTAL This Period (last page this line number only).....	

201606170200199632



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 87
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Transaxt</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 190 Monroe Ave NW Ste 500		Amount of Each Disbursement this Period 32.63
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement Bank Charges/Credit Card Fees	Transaction ID : SB17.10379
Candidate Name	003 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Transaxt</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2016
Mailing Address 190 Monroe Ave NW Ste 500		Amount of Each Disbursement this Period 5.63
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement Credit Card - Bank Charges	Transaction ID : SB17.6826
Candidate Name	001 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Transaxt</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2016
Mailing Address 190 Monroe Ave NW Ste 500		Amount of Each Disbursement this Period 130.76
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement Bank Charges/Credit Card Fees	Transaction ID : SB17.10376
Candidate Name	003 Category/ Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	169.02
TOTAL This Period (last page this line number only).....	

201606170200199633

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 87
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Transaxt</b>		Date of Disbursement MM / DD / YYYY 05 / 20 / 2016
Mailing Address 190 Monroe Ave NW Ste 500		Amount of Each Disbursement this Period 153.46
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement BankCharges/Credit Card Fees	Transaction ID : SB17.8206
Candidate Name	Category/ Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Transaxt</b>		Date of Disbursement MM / DD / YYYY 05 / 24 / 2016
Mailing Address 190 Monroe Ave NW Ste 500		Amount of Each Disbursement this Period 12.83
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement Credit Card Fees	Transaction ID : SB17.8239
Candidate Name	Category/ Type 003	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Transaxt</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2016
Mailing Address 190 Monroe Ave NW Ste 500		Amount of Each Disbursement this Period 38.25
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement Credit Card Fees	Transaction ID : SB17.8360
Candidate Name	Category/ Type	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	204.54
TOTAL This Period (last page this line number only).....	

201606170200199634

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 75 OF 87
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Vertical Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 27 / 2016
Mailing Address 190 Monroe Ave NW Suite 500		Amount of Each Disbursement this Period 8153.97
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement Digital Advertising Expense	Transaction ID : SB17.8248
Candidate Name	Category/ Type 004	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Victory Phones</b>		Date of Disbursement MM / DD / YYYY 05 / 09 / 2016
Mailing Address 190 Monroe Ave NW 5th Floor		Amount of Each Disbursement this Period 900.00
City Grand Rapids	State MI	
Zip Code 49503	Purpose of Disbursement GOP Primary Poll	Transaction ID : SB17.8223
Candidate Name	Category/ Type 005	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Which Wich</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 2842 Council Tree Ave		Amount of Each Disbursement this Period 30.94
City Fort Collins	State CO	
Zip Code 80525	Purpose of Disbursement Travel Expense	Transaction ID : SB17.8273
Candidate Name	Category/ Type 002	
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9053.97
<b>TOTAL</b> This Period (last page this line number only).....	

201606170200199635

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. Xplore Business Services, Inc.**

Mailing Address 729 Orion Drive

Date of Disbursement

MM	DD	YYYY
04	01	2016

City State Zip Code  
Colorado Springs CO 80906

Amount of Each Disbursement this Period

1137.50
---------

Purpose of Disbursement  
FEC Compliance Work

001
-----

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016

Primary  General  
 Other (specify)

State: District:

Transaction ID : SB17.4487

Full Name (Last, First, Middle Initial)

**B. Xplore Business Services, Inc.**

Mailing Address 729 Orion Drive

Date of Disbursement

MM	DD	YYYY
04	15	2016

City State Zip Code  
Colorado Springs CO 80906

Amount of Each Disbursement this Period

1673.75
---------

Purpose of Disbursement  
FEC Compliance

001
-----

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016

Primary  General  
 Other (specify)

State: District:

Transaction ID : SB17.6656

Full Name (Last, First, Middle Initial)

**C. Xplore Business Services, Inc.**

Mailing Address 729 Orion Drive

Date of Disbursement

MM	DD	YYYY
04	29	2016

City State Zip Code  
Colorado Springs CO 80906

Amount of Each Disbursement this Period

1040.00
---------

Purpose of Disbursement  
FEC Compliance

001
-----

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016

Primary  General  
 Other (specify)

State: District:

Transaction ID : SB17.6771

SUBTOTAL of Disbursements This Page (optional).....

3851.25
---------

TOTAL This Period (last page this line number only).....

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201606170200199636

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 77 OF 87	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)  
**Robert Blaha for Colorado**

Full Name (Last, First, Middle Initial) <b>A. Xplore Business Services, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 12 / 2016	
Mailing Address 729 Orion Drive		Amount of Each Disbursement this Period 1300.00	
City Colorado Springs	State CO	Zip Code 80906	Category/ Type 001
Purpose of Disbursement FEC Compliance Work			
Candidate Name		Transaction ID : SB17.8226	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Xplore Business Services, Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2016	
Mailing Address 729 Orion Drive		Amount of Each Disbursement this Period 1950.00	
City Colorado Springs	State CO	Zip Code 80906	Category/ Type 001
Purpose of Disbursement FEC Compliance			
Candidate Name		Transaction ID : SB17.8346	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City	State	Zip Code	Category/ Type
Purpose of Disbursement			
Candidate Name		Transaction ID :	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3250.00
<b>TOTAL</b> This Period (last page this line number only).....	504135.14

201606170200199637

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Blaha for Colorado

Full Name (Last, First, Middle Initial)

**A. CAPT TATNALL LEA HILLMAN**

Mailing Address 504 W BLEEKER ST

City ASPEN State CO Zip Code 81611

Purpose of Disbursement  
Refund of Excess Contribution

010

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2016

Amount of Each Disbursement this Period

5400.00

Transaction ID : SB20A.6800

Full Name (Last, First, Middle Initial)

**B. CAPT TATNALL LEA HILLMAN**

Mailing Address 504 W BLEEKER ST

City ASPEN State CO Zip Code 81611

Purpose of Disbursement  
Refund of Excessive Contribution

010

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 27 / 2016

Amount of Each Disbursement this Period

5400.00

Transaction ID : SB20A.8307

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

10800.00

TOTAL This Period (last page this line number only).....

10800.00

201606170200199638

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Robert Blaha for Colorado** Transaction ID : **SC/10.6620**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **PERSONAL FUNDS]**  
**ROBERT B BLAHA**  
 Election: 2016  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 14335 ROLLER COASTER ROAD

City State ZIP Code  
 COLORADO SPRINGS CO 80920

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
 400000.00 0.00 400000.00

**TERMS**  
 Date Incurred Date Due Interest Rate Secured:  
 01 / 07 / 2016 M M / D D / 01/07/2020 Y 4.50 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 400000.00  
**TOTALS** This Period (last page in this line only) .. ▶ [ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201606170200199639

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Robert Blaha for Colorado** Transaction ID : **SC/10.6621**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **PERSONAL FUNDS]**  
**ROBERT B BLAHA**  
 Election: 2016  
 Primary  
 General  
 Other (specify) ▼  
 Mailing Address  
 14335 ROLLER COASTER ROAD

City State ZIP Code  
 COLORADO SPRINGS CO 80920

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
 600000.00 0.00 600000.00

**TERMS**  
 Date Incurred Date Due Interest Rate Secured:  
 03 / 30 / 2016 M M / D D / 03/30/2020 Y 4.50 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 600000.00  
**TOTALS** This Period (last page in this line only) ... ▶ 1000000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201606170200199640



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Robert Blaha for Colorado**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Capitol Caging Corporation**

Nature of Debt (Purpose):

Indirect Program Expense: Caging and Escrow

Mailing Address 504 Shaw Road  
Suite 217

City State Zip Code  
Sterling VA 20166

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.10439

Amount Incurred This Period

320.36

Payment This Period

0.00

Outstanding Balance at Close of This Period

320.36

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Civis Technologies, LLC**

Nature of Debt (Purpose):

Telephone

Mailing Address 1155 Kelly Johnson Blvd  
Suite 110

City State Zip Code  
Colorado Springs CO 80920

Outstanding Balance Beginning This Period

25.00

Transaction ID : SD10.4481

Amount Incurred This Period

0.00

Payment This Period

25.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Consolidated Mailing Services**

Nature of Debt (Purpose):

Direct Mail Program: Printing & Mailshop

Mailing Address 504 Shaw Road  
Suite 206

City State Zip Code  
Sterling VA 20166

Outstanding Balance Beginning This Period

13327.38

Transaction ID : SD10.4510

Amount Incurred This Period

0.00

Payment This Period

13327.38

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional) ...

320.36

2) TOTALS This Period (last page this line number) ...

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

201606170200199641

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Robert Blaha for Colorado**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Consolidated Mailing Services**

Nature of Debt (Purpose):

Direct Mail Program: Printing and Mailshop

Mailing Address 504 Shaw Road  
Suite 206

City State Zip Code  
Sterling VA 20166

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.10440

Amount Incurred This Period

29747.84

Payment This Period

0.00

Outstanding Balance at Close of This Period

29747.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Cycle A&M**

Nature of Debt (Purpose):

Petition Expense

Mailing Address 1700 Lincoln Street

City State Zip Code  
Denver CO 80203

Outstanding Balance Beginning This Period

33447.00

Transaction ID : SD10.4488

Amount Incurred This Period

0.00

Payment This Period

33447.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Direct Support Services**

Nature of Debt (Purpose):

Direct Mail Program: Data Processing

Mailing Address 1155-15th Street  
Suite 410

City State Zip Code  
Washington DC 20005

Outstanding Balance Beginning This Period

2180.13

Transaction ID : SD10.4511

Amount Incurred This Period

0.00

Payment This Period

2180.13

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional) ...

29747.84

2) TOTALS This Period (last page this line number) ...

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

201606170200199642

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 83 OF 87
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Robert Blaha for Colorado**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Direct Support Systems, Inc.</b>		Nature of Debt (Purpose): Direct Mail Program: Data Processing
Mailing Address 4095 River Forth Drive		
City Fairfax	State VA	Zip Code 22030

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.10441
Amount Incurred This Period 2381.59	Outstanding Balance at Close of This Period 2381.59
Payment This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Donor Precision, LLC/DonorBureau</b>		Nature of Debt (Purpose): Direct Mail Program: Printing & Mailshop
Mailing Address 1900 N. Culpeper Street		
City Arlington	State VA	Zip Code 22207

Outstanding Balance Beginning This Period 661.10	Transaction ID : SD10.4512
Amount Incurred This Period 0.00	Outstanding Balance at Close of This Period 0.00
Payment This Period 661.10	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Donor Precision, LLC/DonorBureau</b>		Nature of Debt (Purpose): Direct Mail Program: Printing and Mailshop
Mailing Address 1900 N. Culpeper Street		
City Arlington	State VA	Zip Code 22207

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.10442
Amount Incurred This Period 444.02	Outstanding Balance at Close of This Period 444.02
Payment This Period 0.00	

1) SUBTOTALS This Period This Page (optional) ...	2825.61
2) TOTALS This Period (last page this line number) ...	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

201606170200199643

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Robert Blaha for Colorado**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ForthRight Strategy, Inc.**

Nature of Debt (Purpose):  
Direct Mail: Creative Fees

Mailing Address 1155 - 15th Street  
Suite 410

City State Zip Code  
Washington DC 20005

Outstanding Balance Beginning This Period

7226.01

Transaction ID : SD10.4514

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7226.01

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ForthRight Strategy, Inc.**

Nature of Debt (Purpose):  
Direct Mail: Creative Fees

Mailing Address 1155 - 15th Street  
Suite 410

City State Zip Code  
Washington DC 20005

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.10443

Amount Incurred This Period

9779.31

Payment This Period

0.00

Outstanding Balance at Close of This Period

9779.31

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Google, Inc.**

Nature of Debt (Purpose):  
Google Apps for Work

Mailing Address 1600 Amphitheatre Parkway

City State Zip Code  
Mountain View CA 94043

Outstanding Balance Beginning This Period

25.00

Transaction ID : SD10.4479

Amount Incurred This Period

0.00

Payment This Period

25.00

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional) ...

17005.32

2) TOTALS This Period (last page this line number) ...

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

201606170200199644

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Robert Blaha for Colorado**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Legacy Lists, Inc.**

Nature of Debt (Purpose):

Direct Mail Program: List Rental Expense

Mailing Address 1155 - 15th Street  
Suite 410

City State Zip Code  
Washington DC 20005

Outstanding Balance Beginning This Period

4442.63

Transaction ID : SD10.4516

Amount Incurred This Period

0.00

Payment This Period

4442.63

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Legacy Lists, Inc.**

Nature of Debt (Purpose):

Direct Mail Program: List Rental Expense

Mailing Address 1155 - 15th Street  
Suite 410

City State Zip Code  
Washington DC 20005

Outstanding Balance Beginning This Period

465.71

Transaction ID : SD10.4518

Amount Incurred This Period

0.00

Payment This Period

465.71

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Legacy Lists, Inc.**

Nature of Debt (Purpose):

Direct Mail Program: List Rental Expense

Mailing Address 1155 - 15th Street  
Suite 410

City State Zip Code  
Washington DC 20005

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.10444

Amount Incurred This Period

3889.61

Payment This Period

0.00

Outstanding Balance at Close of This Period

3889.61

1) SUBTOTALS This Period This Page (optional) ...

3889.61

2) TOTALS This Period (last page this line number) ...

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

201606170200199645

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Robert Blaha for Colorado**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Legacy Lists, Inc.**

Nature of Debt (Purpose):

Direct Mail Program: List Rental Expense

Mailing Address 1155 - 15th Street  
Suite 410

City State Zip Code  
Washington DC 20005

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.10445

Amount Incurred This Period

621.44

Payment This Period

0.00

Outstanding Balance at Close of This Period

621.44

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Joe Neville**

Nature of Debt (Purpose):

Campaign Manager

Mailing Address 1509 Chickadee Street

City State Zip Code  
Loveland CO 80123

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.10707

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Simpkins Escrow LLC**

Nature of Debt (Purpose):

Indirect Program Expense: Caging & Escrow

Mailing Address 29243 St Just Drive

City State Zip Code  
Unionville VA 22567

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.10446

Amount Incurred This Period

304.22

Payment This Period

0.00

Outstanding Balance at Close of This Period

304.22

1) SUBTOTALS This Period This Page (optional) ...

5925.66

2) TOTALS This Period (last page this line number) ...

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

201606170200199646

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Robert Blaha for Colorado**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Michael Sweet (Epitage Media)</b>		Nature of Debt (Purpose): Production Costs
Mailing Address 4868 S. Meadow Lark Drive		
City	State	Zip Code
Castle Rock	CO	80109

Outstanding Balance Beginning This Period	Transaction ID : SD10.4483	
1025.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	1025.00	0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Xplore Business Services, Inc.</b>		Nature of Debt (Purpose): FEC Compliance Work
Mailing Address 729 Orion Drive		
City	State	Zip Code
Colorado Springs	CO	80906

Outstanding Balance Beginning This Period	Transaction ID : SD10.4486	
1137.50		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	1137.50	0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ...	0.00
2) TOTALS This Period (last page this line number) ...	59714.40
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	1000000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	1059714.40

201606170200199647

Red States Senate  
Post Office

INDUCTION

United States Senate  
Post Office

INDUCTION

United States Senate  
Post Office

INDUCTION



United States Senate  
Post Office

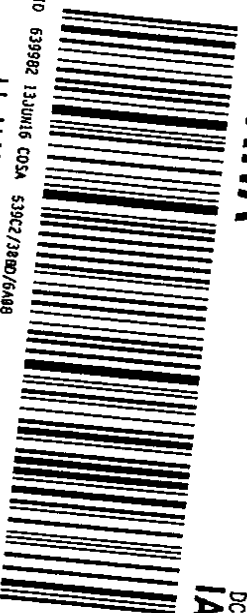
OPENED  
FOR  
INSPECT

XC YKNA

FedEx  
TRK# 8739 5153 1738  
0200

TUE - 14 JUN 10:30A  
PRIORITY OVERNIGHT

20510  
DC-US  
IAD



FID 639982 13JUN16 CSA 539C2/3880/6A08

Insert  
airbill  
here

fedex.com 1800.GoFedEx 1800.463.3339

1 From **FedEx US AIRBILL**  
Express 8739 5153 1738

Date \_\_\_\_\_ Sender's Fedex  
Account Number \_\_\_\_\_

Sender's Name \_\_\_\_\_ Phone \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

2 Your Internal Billing Reference

3 To Recipient Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_



8739 5153 1738

REV 11/02 RT

4a Express Package Service

01  FedEx Priority Overnight

03  FedEx 2Day

4b Express Freight Service

7U  FedEx 1Day Freight

02  FedEx 2Day Freight

5 Packaging  FedEx Pak

06  FedEx 02L

6 Special Delivery Signature Options

03  SATURDAY DELIVERY

04  Signature Required

05  Signature Required - Restricted

06  Signature Required - Restricted

7 Payment Bill to:

1  Sender

2  Recipient

3  Third Party

4  Cash/Check

5  Cash/Check

6  Cash/Check

Screened by Postage over 150 lbs  
Sense Post Office

JUN 15 2005

fedex.com 1800.GoFedEx 1800.463.3339

879661002071909102



# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	<b>6/13/16</b>	<input checked="" type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

POSTMARK ILLEGIBLE  NO POSTMARK

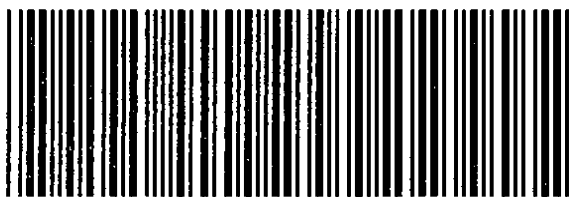
FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

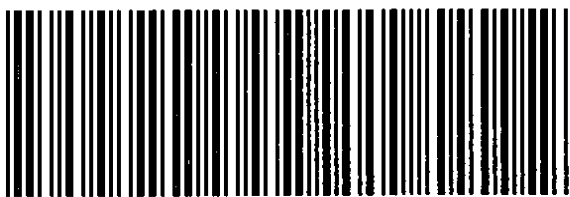
PREPARER **MN** DATE PREPARED **6/17/16**

201606170200199649

SEN PATCH



SEN PATCH



201606170200199650