

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines.
BLAHA FOR CONGRESS

ADDRESS (number and street)
 Check if different than previously reported. (ACC) -

2. **FEC IDENTIFICATION NUMBER ▼**
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY ▲ STATE ▲ ZIP CODE ▲
STATE ▼ DISTRICT

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 in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period / / through / /

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 *[Electronically Filed]* Date / /

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
BLAHA FOR CONGRESS

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 0.00 | 0.00 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 0.00 | 0.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 0.00 | 0.00 |
| (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))..... | 0.00 | 0.00 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 282.89 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 1200.00 | |

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

BLAHA FOR CONGRESS

Report Covering the Period: From: / / To: / /

| 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)..... | 0.00 | 0.00 |
| (ii) Unitemized..... | 0.00 | 0.00 |
| (iii) TOTAL of contributions from individuals ▶ | 0.00 | 0.00 |
| (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)).. | 0.00 | 0.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 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)..... ▶ | 0.00 | 0.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 0.00 | 0.00 |
| 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 | 0.00 | 0.00 |
| (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))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 0.00 | 0.00 |

III. CASH SUMMARY

| | |
|---|--------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 282.89 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 0.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 282.89 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 0.00 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 282.89 |

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

BLAHA FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LLC HCA

Mailing Address 1155 Kelly Johnson Blvd
 Suite 110

City State Zip Code
 Colorado Springs CO 80920

Nature of Debt (Purpose):
Rent

| | | |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID : SD10.4106 | |
| <input type="text" value="1200.00"/> | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| <input type="text" value="0.00"/> | <input type="text" value="0.00"/> | <input type="text" value="1200.00"/> |

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

| | | |
|---|----------------------|---|
| Outstanding Balance Beginning This Period | | |
| <input type="text"/> | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

| | | |
|---|----------------------|---|
| Outstanding Balance Beginning This Period | | |
| <input type="text"/> | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional) | <input type="text" value="1200.00"/> |
| 2) TOTALS This Period (last page this line number only) | <input type="text" value="1200.00"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text" value="0.00"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text" value="1200.00"/> |