

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee/Perso	n:	Christopher Hout	chens		
		As Shown on Regist	ation		
Address of Committee/Person		4549 Desert Varnish Drive			
City, State & Zip Code:		Colorado Springs, CO, 80922			
Committee Type:					
Name of Financial Institution:		Security Service Federal Credit Union			
Address of Financial Institution		5820 Barnes Rd			
City, State & Zip Code of Financial Institution		Colorado Springs, CO, 80922			
	J. ends previous report filed on (new information ONLY 03/27/			05/05/2017	
	Date		Da	ate	
Please complete applicable sche	edules prior to completin	g the information ir	the follo	owing table.	
			Tota	Is Detailed Summary Page	
1 Funds on Hand at the Beginning of Reporting Period (monetary on				\$84.00	
2 Total Monetary Contributions (line 11 of Detailed Summary)				\$0.00	
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)				\$84.00	
4 Total Spending (line 20 of Detailed Summary)				\$0.00	
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)			.)	\$84.00	
I hereby certify and declare, under penal- including all schedules, statements, and received during this reporting period inclu- organization are from permissible source Print Registered Agent's Name:	attachments, are true and con uding any contributions receive s. Christopher Houtchens	f my knowledge or belie rect, and that to the bes ed in the form of membe	t of my kno ership dues	owledge or belief all contributions s transferred by a membership	
Registered Agent's Signature:	(Submitted Electronica	lly)	Date:	05/01/2017	
Print Candidate Name:	Christopher Houtchens	3			
Candidate's Signature:	(Submitted Electronica	llv)	Date:	05/01/2017	

	Г	Detailed Summary	
	L	-	
	f Committee/Person		1
Current Rep	porting Period:	03/27/2017 Through	05/05/2017
Funds on ha	and at the beginning	of reporting period (Monetary Only)	\$84.00
6	Itemized Monetary Contributions \$20 or More		\$0.00
7	Total of Non-Itemiz	ed Contributions (\$19.99 or Less)	\$0.00
	(Number of Cor	ntributions of \$19.99 or Less: 0)	
8		_oans Received	\$0.00
	(Ple;	ase list on Schedule "C")	
9 T		I of Other Receipts	\$0.00
	(In	terest, Dividends, etc.)	
10 Returned		penditures (from recipient)	\$0.00
	(Plea	ase list on Schedule "D")	
11	Total M	onetary Contributions	\$0.00
	(Tota	al of lines 6 through 10)	
12	Total Non	-Monetary Contributions	\$0.00
	(From Statement of No	on-Monetary Contributions Schedule "A-2")	
13	То	tal Contributions	\$0.00
		(Line 11 + Line 12)	
14 Itemize		Expenditures \$20 or More	\$0.00
	(Plea	ase list on Schedule "B")	
15		on-Itemized Expenditures	\$0.00
	(Exper	nditures of \$19.99 or Less)	
16		Repayments Made	\$0.00
	(Plea	ase List on Schedule "C")	
17	Returned	Contributions (To donor)	\$0.00
	(Pleas	e list on Schedule "D")	
18	Clos	seout Distributions	\$0.00
	(Balance must b	e zero. Please attach Schedule E.)	
19	(Inter	ntionally Left Blank)	
20		Total Spending	\$0.00
	Lines 14 through 17)		