## 15031142112

FEC FORM 1

## STATEMENT OF **ORGANIZATION**

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				······································	Office List Only_2	AMOLO
NAME OF     COMMITTEE (in full)		(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	FEC MAIL	CENTER
COMMITTEE	70	ELECT T	ISHA CASI	DA TO C	ONGRE	S <sub>1</sub> S <sub>1</sub>
	· <del>L.L.L.L</del>			<u> </u>	<u> </u>	
ADDRESS (number and street)	PO	BOX 819	4.4	1 1 1 1 1	<u> </u>	
(Check if address is changed)			. ·			
	A.S.	P <sub>E</sub> N <sub>1</sub> : 1		CO 8 STATE ▲	1/16/12 - L ZIP COI	DE 🛦
COMMITTEE'S E-MAIL ADDR	ESS		·			•
(Check if address is changed)	$C_{i}O_{j}$	N.T.A.C.T.O.C	AS10 A2014	COM	,; <u>, 4                                   </u>	
	Optiona	l Second E-Mail Ad	dress	en e		• •
					<u> </u>	
COMMITTEE'S WEB PAGE AL	DRESS (	JRL)				
(Check if address is changed)	W W	MOCASID	A 2 0 1 4 . COM		1 1 1 1 1	
	L			·	1 1 1 1 1	
2. DATE // /	5 2	2013				
3. FEC IDENTIFICATION N	IUMBER	► C <i>H</i>	2003146	;		
4. IS THIS STATEMENT	, NEV	V (N) OR	AMENDED (A)		·	
I certify that I have examined	this Staten	ent and to the best	of my knowledge and belief	it is true, correct ar	id complete.	
Type or Print Name of Treasur	er Z	ISHA T. GAS	NOA	·		
Signature of Treasurer	16	d Caoi	<u>da)</u>	Date [ ]	11.5 2	013
NOTE: Submission of false, error			may subject the person signin	_	e penalties of 2 U	.S.C. §437g.
Office Use		·	For further information Federal Election Commit		FEC FORM	

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ayc	-

		OMMITTEE • Committee:			
(a)	X	This committee is a principal campaign committee. (Complete the candidate information below.)			
(b)		rug			
Name Cand		TISHA T CASIDA			
Cand Party	idete Affiliatio	on $\mathcal{I}\mathcal{N}\mathcal{D}$ Office State Senate President District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name Cand					
Part	y Con	nmittee:			
(d)		(National, State (Democratic, This committee is a visual or subordinate) committee of the Republican, etc.) Party.			
Poli	ical A	ction Committee (PAC):			
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a			
		Corporation Corporation w/o Capital Stock Labor Organization			
		Membership Organization Trode Association Cooperative			
		In addition, this committee is a Lobbyist/Registrant PAC.			
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)			
		In addition, this committee is a Lobbyist/Registrant PAC.			
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Join	t Fund	Iraising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.			
(h)	enal.	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.			
	Com	mittees Participating in Joint Fundraiser			
	· <sub>1.</sub>	FEC ID number C			
	2.	FEC ID number			
	3.	FEC ID number			
	4.				

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٧	Write or Type Committee Name				
	COMMITTEE TO	ELECT TIISHA	CASIDA TO	CONGO	less
6.	Name of Any Connected O	rganization, Affiliated Com	mittee, Joint Fundraising Re	presentative, or	Leadership PAC Sponsor
1	11111111				
L		<u> </u>			
L		<u> </u>		_ <del></del>	
	Mailing Address			<u> </u>	
	·				
		CIT		STATE	ZIP CODE
	Relationship: Connected	Organization Affiliated C	ommittee Joint Fundraisi	ng Representative	Leadership PAC Sponsor
<b>'</b> .	Custodian of Records: Identification books and records.	tify by name, address (phone	number optional) and pos	sition of the person	on in possession of committee
	·				
	Full Name 7/5/	A T CASID	<u> </u>		
	Mailing Address	PO BOX 89	44		
			<u> </u>	1 1 1 1 1	<u> </u>
		ASPEN	111111	C0	81612-
	Title or Position	CITY	,	STATE	ZIP CODE
	TREASURER	<u> </u>	Telephone n	umber 71	9-1252-11763
_	Treasurer: List the name and	1 address (nhone number	ontional) of the treasurer of t	he committee: ar	nd the name and address of
<b>.</b>	any designated agent (e.g., a		opuonal, or the treature of the		
	Full Name	A T CASID	<b>A</b>		
	Mailing Address	PO BOX 89	7171 1 1 1 1 1 1 1	<u> </u>	
		Acar.	<u> </u>	<u> </u>	
		A.S.P.E.M. CITY	,	CO STATE	ZIP CODE
	Title or Position	GIT		_	
_	TREASURER		Telephone n	umber 71	9-1252-11763

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<del></del>	HA T CASIDA		
Mailing Address			
	A.S.P.E.N. CITY	C <sub>I</sub> O STATE	ZIP CODE
Title or Position TIRIE GSUIRER	Telephone	number 2	19-252-1763
Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository,		mittee deposits	funds, holds accounts, rents
TICIF	BANK	<u>                                     </u>	
Mailing Address	3290 CENTENNIAL BL	VD	
	<u>Liinininininininininininininininininini</u>		
	[C,O,L,O,R,A,O,O, SPRINGS	CO	18.0.9.0.7 - L
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address		<u> </u>	
·		<u> </u>	
	CITY	STATE	ZIP CODE

CASIDA P.O. 80X 8944 ASPEN, CO 81612

GRAND JUNCTION CO BES

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FEDERAL ELECTION COMMISSION 9999 E STREET, NW
WASHINGTON, DC

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DATE PREPARED

PREPARER (8/2013)