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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Restore the Constitution Coalition 1624 Market Street ADDRESS (number and street) Suite 202 (Check if address is changed) Denver 80202 CO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS ahornaday@hornadaylaw.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00584482 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Alexander Hornaday Type or Print Name of Treasurer Alexander Hornaday [Electronically Filed] 80 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

FF0 <b>F</b>	m 1 (Pavisad 02/2000)	Poge 2
TYPE OF CO	m 1 (Revised 02/2009)  DMMITTEE	Page 2
	Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below	.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Corinformation below.)	nplete the candidate
Name of Candidate	Scott Walker	
Candidate Party Affiliatio	Office Sought: House Senate President	State
(c) ×	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Com		(Domogratic
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political Ac	etion Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade 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 scommittee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	raising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Comr	nittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Name	. 490
Restore the Constitution Coalition	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
NONE	
<u> </u>	
Mailing Address	
CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person i books and records.	in possession of committee
Alexander Hornaday	1
Full Name1624 Market Street	
Mailing Address Suite 202	
Denver CO 802	202
Title or Position CITY STATE	ZIP CODE
Telephone number	
. <b>Treasurer</b> : List the name and address (phone number optional) of the treasurer of the committee; and the any designated agent (e.g., assistant treasurer).	ne name and address of
Full Name Alexander Hornaday	1
of Treasurer	
Mailing Address	
Suite 202	
Denver CO 802	
CITY STATE Title or Position	ZIP CODE
Telephone number	

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other Depo safety deposit boxes o Name of Bank, Deposi	or maintains funds.	
safety deposit boxes o Name of Bank, Deposi	or maintains funds.	
safety deposit boxes o Name of Bank, Deposi	or maintains funds. sitory, etc. ells Fargo	
safety deposit boxes o Name of Bank, Deposi	or maintains funds. sitory, etc. ells Fargo	80202
safety deposit boxes o Name of Bank, Deposi	ells Fargo	80202 ZIP CODE
safety deposit boxes o Name of Bank, Deposi	cr maintains funds.  sitory, etc.  ells Fargo  1601 Blake Street  Denver  CITY  STATE	
safety deposit boxes o Name of Bank, Deposi  We  Mailing Address	cr maintains funds.  sitory, etc.  ells Fargo  1601 Blake Street  Denver  CITY  STATE	
safety deposit boxes o Name of Bank, Deposi  We  Mailing Address	ells Fargo  1601 Blake Street  Denver  CITY  STATE	
Name of Bank, Deposition  Name of Bank, Deposition  Name of Bank, Deposition	ells Fargo  1601 Blake Street  Denver  CITY  STATE	
Name of Bank, Deposition  Name of Bank, Deposition  Name of Bank, Deposition	ells Fargo  1601 Blake Street  Denver  CITY  STATE	