

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. **12EE4M5**

Shaffer for Colorado

ADDRESS (number and street) **P.O. Box 1181**

(Check if address is changed) **Longmont** **CO** **80502**

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed) **sally@shafferforcolorado.com**

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) **http://www.shafferforcolorado.com**

2. DATE **07 5 2011**

3. FEC IDENTIFICATION NUMBER: **C To be assigned**

4. 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.

Type or Print Name of Treasurer: **Patricia Davis**

Signature of Treasurer: *Patricia Davis* Date: **07 05 2011**

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.

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5. TYPE OF COMMITTEE

Candidate 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. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation _____ Office Sought House Senate President State _____ District _____

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee

- (d) This committee is a _____ (National, State, or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC)

- (e) This committee is a separate segregated fund (directly connected organization on line 6). Its connected 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 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.)

Joint Fundraising 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) 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.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number
2. _____ FEC ID number
3. _____ FEC ID number
4. _____ FEC ID number

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Write or Type Committee Name

Shaffer for Colorado

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name

Sally Chafee

Mailing Address

P.O. Box 1181

Longmont

CO

80502

Title or Position

CITY

STATE

ZIP CODE

Assistant Treasurer

Telephone number

970

364

6025

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Patricia Davis

Mailing Address

P.O. Box 1181

Longmont

CO

80502

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

970

364

6025

11030621702

Full Name of Designated Agent: **Sally Chafee**

Mailing Address: **P.O. Box 1181**

Longmont **CO** **80502**
CITY STATE ZIP CODE

Title or Position: **Assistant Treasurer** Telephone number: **970** **364** **6025**

8. Banks or Other Depositories: List of banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.: **FirstBank**

Mailing Address: **1707 N. Main St**

Longmont **CO** **80501**
CITY STATE ZIP CODE

Name of Bank, Depository, etc.:

Mailing Address: _____

CITY STATE ZIP CODE

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed-Exp* Shipping Date
7/6/11
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

JMK *7/8/11*
 PREPARER DATE PREPARED

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