FEC

STATEMENT OF

FORM 1	ORGANIZA	TION		
1 0111111 1	(See instructions	s)		Office use only
NAME OF COMMITTEE (in fi	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	1 1
BIKES BELONG	G COALITION LTD. POLITICAL A			
ADDRESS (number and st	treet) 1928 Pearl Street			
(Check if address				
is changed)	Boulder		[co	80302 -
		CITY	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MAIL	ADDRESS (Please provide only one e-m			
(Check if address is changed)	erik@bikesbelong.org	9		
3 ,				
COMMITTEE'S WEB F	PAGE ADDRESS (URL)			
(Check if address	www.bikesbelong.org	1		
is changed)	<u> </u>			
2. DATE M M M 0 1	7 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	000070000	•	
3. FEC IDENTIFICAT	TION NUMBER			
4. IS THIS STATEME	ENT NEW (N) OR	X AMENDED (A)		
i certify that I have examin	ed this Statement and to the best of my know	riedge and belief it is true, correc	ot and complete	
Type or Print Name of T	reasurer Erik Esborg			
Signature of Treasurer	Electronically Filed by Erik Esborg	g	Date 03	/ 24 / Y 2010
NOTE: Submission of fals	se, erroneous, or incomplete information may ANY CHANGE IN INFORMAT			
Office Use Only		For further informati Federal Election Com Toll Free 800-424-95:	on contact:	FEC FORM 1 (Revised 02/2009)

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5.											
	(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 Candi										
	Candi Party	idate Affiliatio	Office Sought: House Senate President	State District							
	Name Candi										
	Party	Committee: (National, State (Democratic.									
	(d)			(Democratic, Republican,etc.) Party.							
	Politic	cal Act	ion Committee (PAC):								
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:							
			Corporation Corporation w/o Capital Stock La	bor Organization							
			Membership Organization X Trade Association C	ooperative							
			In addition, this committee is a Lobbyist/Registrant PAC.								
	(f)	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d 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 F	Fundra	ising 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 committees/organizations, none of which is an authorized committee of a federal candidate.	or more political							
	Committees Participating in Joint Fundraiser										
			1. FEC ID number								
			2. FEC ID number								
			3 FEC ID number C								
			FEC ID number C								

Write or Type Committee Name

	BIKES BELONG COALI	TION LTD. POLITICAL ACTION COM	MITTEE				
6.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fur	draising Representative, or Lea	dership PAC Sponsor			
Ш	NONE		1 1 1 1 1 1 1 1 1 1 1				
			<u> </u>				
	Mailing Address						
		CITY▲	STATE.▲	ZIP CODE			
	Relationship: Connected Organization	Affiliated Committee Jo	int Fundraising Representative	Leadership PAC Sponsor			
7.	Custodian of Records: Ide possession of Committee Full Name Erik Es Mailing Address	sbora	er optional), and position of				
		Boulder		80302			
	Title or Position ♥ Finance D	CITY A	STATE Telephone number 303	ZIP CODE 14 449 _ 4893			
8.		and address (phone number optional designated agent (e.g., assistant treat		nittee; and the			
	Full Name of Treasurer Erik E	sborg					
	Mailing Address	1928 Pearl Street		Leadership PAC Sponsor the person in 80302 _ ZIP CODE & 449 _ 4893 hittee; and the			
		Boulder		80302			
	Title or Position ♥ CITY ▲		STATE ▲	ZIP CODE A			
	Finance D	Director	Telephone number				

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	Full Name of Designated Agent	-											
	Mailing Address	s											
	Title or Position ▼				CITY A	١				STATE A		ZIP CODE A	\
						_		Telep	hone nu	ımber			
9.	Banks or Other I	Depositorie xes or maint	es: List a	II banks or o	other depos	sitories i	n whic	h the c	ommittee	e deposits funds	, holds ac	ccounts, rents	
	Name of Bank, De	epository, et	C.										
	Mailing Address												
					CITY	Δ				STATE △		ZIP CODE	A
Name of Bank, Depository, etc.													
	Mailing Address												
						1 1							
					CITY	4				STATE.▲		ZIP CODE	A