FEC FORM 1			EMEN ANIZA				Office Use		1 / 4 ——
1. NAME OF COMMITTEE (ir	n full)	(Check if is change		Example:If typing, over the lines.	type	12FE4N	15		
PAC in the	Saddle	9							
ADDRESS (number a	nd street)	PO Box 150887							
(Check if a	address								
is changed	d)	Lakewood					80215		
						STATE ▲			
COMMITTEE'S E-MA		S							
(Check if a is changed	address	rachel@rkgde	evelopment	com					
	*)	Optional Second	E-Mail Addre	ess					
COMMITTEE'S WEB	address	RESS (URL)							
2. DATE 12	2 / D 01	D / Y Y Y 2022	Ŷ						
3. FEC IDENTIFIC	CATION NU	MBER 🕨	C coo	829408					
4. IS THIS STATEM		NEW (N)	OR	× AMENDE	D (A)				
I certify that I have e	examined thi	s Statement and t	o the best of	my knowledge and	belief it is	true, corre	ect and comp	lete.	
Type or Print Name	of Treasurer	Gordon, Rachel, ,	3						
Signature of Treasure	er Gordon	n, Rachel, , ,		[Electronically F	iled]	Date	12 / D 30		022
NOTE: Submission of	false, errone			ay subject the person DN SHOULD BE REP				es of 52 U.S	S.C. §30109
Office Use Only				For further infor Federal Election Toll Free 800-424 Local 202-694-11	Commission 4-9530		-	FORM sed 06/2012	

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5.	TYPE O	F COMMITTEE:	
	Candid	ate 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 information below.)	candidate
	Name Candid		
	Candid Party A	Affiliation Office Sought: House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Cand		
	Party C	Committee:(National, State(Democratic, Republican, etc.)This committee is aor subordinate) committee of theRepublican, etc.)	etc.) Party
	Politica	I Action 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	anization
		Membership Organization Trade Association Cooperativ	ve
		In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	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.)	
	(g)	This committee is an independent expenditure-only political committee (Super PAC).	
		In addition, this committee is a Lobbyist/Registrant PAC.	
	(h)	This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC	;).
		In addition, this committee is a Lobbyist/Registrant PAC.	

Joint Fundraising Representative:

(i) 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.
(j) 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
2.

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Write or Type Committee Name

PAC in the Saddle

6.	Name of Any Connected Or PETTERSEN, BRITT				e, J	oint	Fu	ndra	isin	ng F	Rep	res	ent	ativ	ve, d	or	Lea	de	rshi	ρI	PAC	; SI	pon	sor	
	Mailing Address	PO BOX 150887																							
													C	D		Į	80	215 				- L			
			CIT	Y ▲								S	TAT	Έ	•				Z	IP	со	DE			
	Relationship: Connected	Organization Affil	iated O	rganiz	atio	n		Join	t Fu	ndra	aisin	ıg F	Rep	rese	ntat	tive		x	Le	ade	ersh	ip F	PAC	Sp	onsor

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

Gordon, Ra	achel, , ,					
Full Name						
Mailing Address	PO Box 150887					
	Lakewood					
	CITY A	STATE ▲ ZIP CODE ▲				
Title or Position ▼						
Treasurer 720 432 0768 Telephone number - <t< td=""></t<>						

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	Gordon, Rachel, , ,						
of Treasurer							
Mailing Address	PO Box 150887						
	Lakewood CO 80215						
	CITY A STATE A ZIP CODE A						
Title or Position	,						
Treasurer 720 432 0768 Telephone number 720 432 0768							

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Full Name of Designated Agent				
Mailing Address				
		CITY A	STATE 🔺	ZIP CODE
Title or Position ▼				
			Telephone number	

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

Name	of	Bank,	Depository,	etc.

First B	ank							
Mailing Address	12345 West Colfax Avenue							
	Lakewood	CO 80215						
	CITY 🔺	STATE A	ZIP CODE					
Name of Bank, Depository,	Name of Bank, Depository, etc.							
Mailing Address								
		STATE A	ZIP CODE					