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STAT	EMEN	T OF
ORG	ANIZA	TION

FEC FORM 1		STATEMEN ORGANIZA			PAGE 1 / 4
1. NAME OF COMMITTEE (in fu	111)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
ADDRESS (number and		45 S. Miller Street			
(Check if add is changed)	L	akewood □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □		CO L   8 STATE ▲	0226 
COMMITTEE'S E-MAIL	ADDRESS				
(Check if add is changed)	tress k	atie@strategiccomplia	ncellc.com		
	0	ptional Second E-Mail Add	ress		
	L				
COMMITTEE'S WEB P. (Check if add is changed)		SS (URL)			
2. DATE 02	/ D D 20	/ Y Y Y Y 2018			
3. FEC IDENTIFICA	tion nume	SER ► C cc	0670505		
4. IS THIS STATEME	NT	NEW (N) OR	AMENDED (A)		
I certify that I have exa	mined this S	statement and to the best	of my knowledge and belief i	t is true, correct a	nd complete.
Type or Print Name of	Treasurer	Kennedy, Katie, , ,			
Signature of Treasurer	Kennedy,	Katie, , ,	[Electronically Filed]	Date 02	/ D D / Y Y Y Y 20 2018
NOTE: Submission of fals			nay subject the person signing DN SHOULD BE REPORTED V		ne penalties of 2 U.S.C. §437g.
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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	FE	EC For	rm 1 (Revised 02/2009) Page 2
	TYPE	OF C	OMMITTEE
	Cand	lidate	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 Candic		Barrington, Mark, , ,
	Candic Party /	date Affiliatio	on REP Office Sought: K House Senate President CO District 07
(	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name Candic		
	Party	/ Com	imittee:
(	(d)		This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party.
	Politi	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 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.)
J	Joint	Fund	raising 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.
(†	า)		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
		1.	
		2.	
		3.	
		0.	
		4.	FEC ID number

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Write or Type Committee Name

## Committee for Barrington

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

N 																																					
L																																					
	Mailing Address																																				
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										(	CIT	Y											S	TA	ΓE						ZIF	, C	OD	E			
	Relationship:	Connected	l Orç	jani	izat	ion	C	A	ffilia	ate	ed C	Con	nm	itte	e		Jo	int	Fur	ndra	aisi	ng	Re	pre	ser	ntat	ive	C	l	₋ea	dei	rshi	ip P	PAC	: Sp	on	30r
7.	Custodian of Rec books and records		tify	by I	nan	ne,	ad	ldre	SS	(pł	non	e r	านท	nbe	er -	- 0	ptic	onal	) a	nd	po	sitic	on (	of 1	the	pe	rso	n i	n p	005	ses	sio	n o	of co	omi	mitt	ee
		Kannady k	Katic	۷																																	

Kenned	uy, ralle, , ,		
Full Name			
Mailing Address	2318 Curtis Street		
	Denver	CO 80205	
Title or Position	CITY	STATE	ZIP CODE
Treasurer	Telephone	e number	369 2266

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	Kennedy, Katie, , ,
Mailing Address	2318 Curtis Street
	Denver CO 80205 - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - <th< td=""></th<>
	CITY STATE ZIP CODE
Title or Position Treasurer	Image:

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Full Name of Designated Agent				 																			
Mailing Address																							
																					]-[		
					CI	TΥ								STA	ΤE				ZIF	Р С	OD	E	
Title or Position																							
									Tele	eph	one	e ni	umt	ber							] – [		

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.

Wells F	- argo		
Mailing Address	1740 Broadway		
	Denver		80274
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE