Only

STATEMENT OF

PAGE 1/5

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. Students for Laurel Imer PO Box 17747 ADDRESS (number and street) (Check if address is changed) Golden 80402 CO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS wimer@laurelimerforcongress.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) laurelimerforcongress.com (Check if address is changed) DATE 2021 C00790709 FEC IDENTIFICATION NUMBER > 3. 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. Councilman, Nichole, , , Type or Print Name of Treasurer Councilman, Nichole, , , [Electronically Filed] 2021 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

Local 202-694-1100

- I	FEC Fo	rm 1 (Revised 02/2009) Page 2					
		COMMITTEE 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 Cand	e of lidate	Imer, Laurel, , ,					
Cand Party	lidate Affiliati	on REP Office Sought: X House Senate President District Of					
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Cand							
Parl	ty Con	nmittee: (National, State (Democratic,					
(d)		This committee is a committee of the committee of the committee of the committee is a committee of the commi					
Poli	tical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is					
		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.)					
Join	t Fund	Iraising 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.					
	Com	mittees Participating in Joint Fundraiser					
	1.	FEC ID number C					
	2.	FEC ID number					
	3.	FEC ID number					
	4						

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	T ago 🗸
Students for Laurel Imer	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Rep	oresentative or Leadership PAC Sponsor
	oresentative, or Leadership i No opensor
LAUREL IMER FOR CONGRESS	
PO BOX Mailing Address	
17747	
GOLDEN	CO 80402
CITY	STATE ZIP CODE
Relationship: Connected Organization X Affiliated Committee Joint Fundraisin	g Representative Leadership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and pos books and records. 	ition of the person in possession of committee
Councilman, Nichole, , ,	
8666 S Carr St	
Mailing Address	
Littleton	CO 80128
Title or Position CITY	STATE ZIP CODE
Treasurer Telephone nu	mber 720 - 841 - 9748
 Treasurer: List the name and address (phone number optional) of the treasurer of th any designated agent (e.g., assistant treasurer). 	e committee; and the name and address of
Full Name Councilman, Nichole, , , of Treasurer	
Mailing Address 8666 S Carr St	
Littleton	CO 80128 _ _
CITY	STATE ZIP CODE
Title or Position Treasurer Telephone nu	mber 720 - 841 - 9748

FEC Form	1 (Revised 02/2009)		Page 4				
Full Name of Designated Agent	Imer, Weston, , ,						
Mailing Address	16606 W 9th Ave						
	Colden	, co	80401				
	Golden	STATE	ZIP CODE				
Title or Position Campaign Mana	ger	umber 72	20				
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 Bank							
Mailing Address	14185 W Colfax Dr						
	Golden	СО	80401				
	CITY	STATE	ZIP CODE				
Name of Bank, D	Depository, etc.						
Mailing Address							
	1	1 1	1 1 1				

: 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHŽG7 < 98 I @ 'CF' ± H9 A = N5 H± CB

Form/Schedule: F1N Transaction ID:

Laurel Imer For Congress

Form/Schedule: Transaction ID: