

# 48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

|                                                                                                                                                                             |  |                    |                                                                                                                                                                |                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| <b>1. NAME OF COMMITTEE IN FULL</b><br>Brittany Pettersen for Colorado                                                                                                      |  |                    |                                                                                                                                                                |                          |
| ADDRESS (number and street) PO BOX 150887                                                                                                                                   |  |                    |                                                                                                                                                                |                          |
| <b>CITY</b><br>Lakewood                                                                                                                                                     |  | <b>STATE</b><br>CO |                                                                                                                                                                | <b>ZIP CODE</b><br>80215 |
| <b>2. NAME OF CANDIDATE</b><br>Pettersen, Brittany, , ,                                                                                                                     |  |                    | <b>3. OFFICE SOUGHT</b> (State and District)<br>House CO 07                                                                                                    |                          |
| <b>4. FEC IDENTIFICATION NUMBER</b><br>C00637215                                                                                                                            |  |                    |                                                                                                                                                                |                          |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____ |  |                    |                                                                                                                                                                |                          |
| <b>A. FULL NAME</b><br>Huttner, Nathan, , ,                                                                                                                                 |  |                    |                                                                                                                                                                |                          |
| MAILING ADDRESS<br>4610 W Moncrieff Pl                                                                                                                                      |  |                    | Name of Employer<br>Redstone Strategy Group LLC                                                                                                                |                          |
| <b>CITY</b><br>Denver                                                                                                                                                       |  |                    | <b>STATE</b><br>CO                                                                                                                                             |                          |
| <b>ZIP CODE</b><br>80212-1604                                                                                                                                               |  |                    | Date (month, day, year)<br>06/09/2022                                                                                                                          |                          |
| Occupation<br>Consultant                                                                                                                                                    |  |                    | Amount<br>2500.00                                                                                                                                              |                          |
| <b>Transaction ID : 5739919</b>                                                                                                                                             |  |                    |                                                                                                                                                                |                          |
| <b>B. FULL NAME</b><br>Kaplan, Jeremiah, I, ,                                                                                                                               |  |                    |                                                                                                                                                                |                          |
| MAILING ADDRESS<br>2101 Bluebell Ave                                                                                                                                        |  |                    | Name of Employer<br>Sky Health Services                                                                                                                        |                          |
| <b>CITY</b><br>Boulder                                                                                                                                                      |  |                    | <b>STATE</b><br>CO                                                                                                                                             |                          |
| <b>ZIP CODE</b><br>80302-8027                                                                                                                                               |  |                    | Date (month, day, year)<br>06/09/2022                                                                                                                          |                          |
| Occupation<br>Physician                                                                                                                                                     |  |                    | Amount<br>1000.00                                                                                                                                              |                          |
| <b>Transaction ID : 5738434</b>                                                                                                                                             |  |                    |                                                                                                                                                                |                          |
| <b>C. FULL NAME</b><br>Records, Martha, E, ,                                                                                                                                |  |                    |                                                                                                                                                                |                          |
| MAILING ADDRESS<br>1215 Detroit St                                                                                                                                          |  |                    | Name of Employer<br>Self Employed                                                                                                                              |                          |
| <b>CITY</b><br>Denver                                                                                                                                                       |  |                    | <b>STATE</b><br>CO                                                                                                                                             |                          |
| <b>ZIP CODE</b><br>80206-3329                                                                                                                                               |  |                    | Date (month, day, year)<br>06/09/2022                                                                                                                          |                          |
| Occupation<br>Investment Advisor                                                                                                                                            |  |                    | Amount<br>2900.00                                                                                                                                              |                          |
| <b>Transaction ID : 5739921</b>                                                                                                                                             |  |                    |                                                                                                                                                                |                          |
| <b>D. FULL NAME</b><br>Records, Martha, E, ,                                                                                                                                |  |                    |                                                                                                                                                                |                          |
| MAILING ADDRESS<br>1215 Detroit St                                                                                                                                          |  |                    | Name of Employer<br>Self Employed                                                                                                                              |                          |
| <b>CITY</b><br>Denver                                                                                                                                                       |  |                    | <b>STATE</b><br>CO                                                                                                                                             |                          |
| <b>ZIP CODE</b><br>80206-3329                                                                                                                                               |  |                    | Date (month, day, year)<br>06/09/2022                                                                                                                          |                          |
| Occupation<br>Investment Advisor                                                                                                                                            |  |                    | Amount<br>2900.00                                                                                                                                              |                          |
| <b>Transaction ID : 5739922</b>                                                                                                                                             |  |                    |                                                                                                                                                                |                          |
| <b>E. FULL NAME</b><br><br>                                                                                                                                                 |  |                    |                                                                                                                                                                |                          |
| MAILING ADDRESS<br><br>                                                                                                                                                     |  |                    | Name of Employer<br><br>                                                                                                                                       |                          |
| <b>CITY</b><br><br>                                                                                                                                                         |  |                    | <b>STATE</b><br><br>                                                                                                                                           |                          |
| <b>ZIP CODE</b><br><br>                                                                                                                                                     |  |                    | Date (month, day, year)<br><br>                                                                                                                                |                          |
| Occupation<br><br>                                                                                                                                                          |  |                    | Amount<br><br>                                                                                                                                                 |                          |
| <b>SIGNATURE (optional)</b><br>Schneller, Lucinda, , ,                                                                                                                      |  |                    |                                                                                                                                                                |                          |
| DATE<br>06/11/2022                                                                                                                                                          |  |                    | <b>For further information contact:</b><br>Federal Election Commission<br>999 E Street, NW, Washington, DC 20463<br>Toll Free 800-424-9530, Local 202-694-1100 |                          |
| <b>[Electronically Filed]</b>                                                                                                                                               |  |                    |                                                                                                                                                                |                          |

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Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

**FEC FORM 6**  
(Revised 03/2016)