Only

STATEMENT OF

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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. HOPE PAC PO Box 7176 ADDRESS (number and street) (Check if address is changed) Boulder 80306 CO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS rachel@rkgdevelopment.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00701680 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Gordon, Rachel, , , Type or Print Name of Treasurer Gordon, Rachel, , , [Electronically Filed] 09 15 2019 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

EEA	Form 1 (Revised 02/2009)	Page 2
	F COMMITTEE	1 aye 2
Candid	late 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. (Cominformation below.)	plete the candidate
Name of Candida		
Candida Party Af	3.1133	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candida		
Party (Committee:	
(d)		(Democratic, Republican, etc.) Party
Politic	al Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected 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 se committee. (i.e., nonconnected committee)	gregated 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	undraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(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.	o or more political
(committees Participating in Joint Fundraiser	
1	. C	
2	. FEC ID number	
3	. FEC ID number	
2	.	

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Write or Type Committee Na	me	-
HOPE PAC		
6. Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
Neguse		
Mailing Address	311 E Myrtle St	
Walling Madross		
	Fort Collins CO 805	524
	CITY STATE	ZIP CODE
	cted Organization Affiliated Committee Joint Fundraising Representative dentify by name, address (phone number optional) and position of the person	Leadership PAC Sponsor
books and records.	dentity by hame, dudiess (phone number optional) and position of the person	in possession of commuce
Gordon Full Name	, Rachel, , ,	
Mailing Address	PO Box 7176	
Mailing Address		
	Boulder CO 80	306
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	- 570 - 5446
Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and the committee and the co	he name and address of
Full Name Gordon, of Treasurer	, Rachel, , ,	
Mailing Address	PO Box 7176	
	Boulder CO 803	306
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	570 5446

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Full Name of Designated	1	
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
salety deposit bu	oxes or maintains tungs.	
Name of Bank, [FirstBank	
	Depository, etc.	
Name of Bank, [Depository, etc. FirstBank 8280 S Holly St	
Name of Bank, [Depository, etc.	
Name of Bank, [Depository, etc. FirstBank 8280 S Holly St	ZIP CODE
Name of Bank, [FirstBank 8280 S Holly St Centennial CITY STATE	
Name of Bank, [FirstBank 8280 S Holly St Centennial CITY STATE	
Name of Bank, [FirstBank 8280 S Holly St Centennial CITY STATE	
Name of Bank, I	FirstBank 8280 S Holly St Centennial CITY STATE	
Name of Bank, I	FirstBank 8280 S Holly St Centennial CITY STATE	