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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)							
Hickenlooper, John, W., ,	ET Object 17	'			2. Condidate a FFC Identification Number		
(b) Address (number and street) PO Box 300007	★ Check if a	address cr	nanged		Candidate's FEC Identification Number S0CO00575		
(c) City, State, and ZIP Code					3. Is This New Amended		
Denver		СО	80203		Statement (N) OR X (A)		
4. Party Affiliation	5. Office Sought				trict of Candidate		
DEMOCRATIC PARTY	Senate			CO	00		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 (year of election)							
NOTE: This designation should be f	iled with the appropriat	te office lis	sted in th	ne instructions.			
(a) Name of Committee (in full)							
HICKENLOOPER F	OR COLORAD	00					
(b) Address (number and street)							
PO BOX 300669							
(c) City, State, and ZIP Code							
DENVER				CO	80203		
DE	SIGNATION OF	_	_	THORIZED g Representativ			
	(Includin	g Joint Fu	ndraisino	g Representativ			
I hereby authorize the following nan candidacy.	(Includin	g Joint Fu	ndraisino	g Representativ	res)		
I hereby authorize the following nan candidacy. NOTE: This designation should be f	(Includin ned committee, which i	g Joint Fu	ndraisino	g Representativ	res)		
8. I hereby authorize the following nan candidacy. NOTE: This designation should be f (a) Name of Committee (in full)	(Includin ned committee, which i	g Joint Fu	ndraisino	g Representativ	res)		
8. I hereby authorize the following nan candidacy. NOTE: This designation should be f (a) Name of Committee (in full) Hickenlooper Victor	(Includin ned committee, which i	g Joint Fu	ndraisino	g Representativ	res)		
8. I hereby authorize the following nan candidacy. NOTE: This designation should be f (a) Name of Committee (in full) Hickenlooper Victor (b) Address (number and street) 611 Pennsylvania Ave SE Ste 143	(Includin ned committee, which i	g Joint Fu	ndraisino	g Representativ	res)		
8. I hereby authorize the following nan candidacy. NOTE: This designation should be f (a) Name of Committee (in full) Hickenlooper Victor (b) Address (number and street) 611 Pennsylvania Ave SE Ste 143 (c) City, State, and ZIP Code	(Includin ned committee, which i	g Joint Fu	ndraisino	g Representatival campaign cor	mmittee, to receive and expend funds on behalf of my		
8. I hereby authorize the following nan candidacy. NOTE: This designation should be f (a) Name of Committee (in full) Hickenlooper Victor (b) Address (number and street) 611 Pennsylvania Ave SE Ste 143	(Includin ned committee, which i	g Joint Fu	ndraisino	g Representativ	res)		
8. I hereby authorize the following nan candidacy. NOTE: This designation should be f (a) Name of Committee (in full) Hickenlooper Victor (b) Address (number and street) 611 Pennsylvania Ave SE Ste 143 (c) City, State, and ZIP Code Washington	(Includin ned committee, which i iled with the principal community Fund	g Joint Fu	ndraising	g Representatival campaign coree.	mmittee, to receive and expend funds on behalf of my		
8. I hereby authorize the following nan candidacy. NOTE: This designation should be f (a) Name of Committee (in full) Hickenlooper Victor (b) Address (number and street) 611 Pennsylvania Ave SE Ste 143 (c) City, State, and ZIP Code Washington	(Includin ned committee, which i iled with the principal community Fund	g Joint Fu	ndraising	g Representatival campaign coree.	nmittee, to receive and expend funds on behalf of my		
8. I hereby authorize the following nan candidacy. NOTE: This designation should be f (a) Name of Committee (in full) Hickenlooper Victor (b) Address (number and street) 611 Pennsylvania Ave SE Ste 143 (c) City, State, and ZIP Code Washington I certify that I have exa	(Includin ned committee, which i iled with the principal community Fund	g Joint Fu	ndraising	g Representatival campaign coree.	nmittee, to receive and expend funds on behalf of my 20003 and belief it is true, correct and complete.		
8. I hereby authorize the following nan candidacy. NOTE: This designation should be f (a) Name of Committee (in full) Hickenlooper Victor (b) Address (number and street) 611 Pennsylvania Ave SE Ste 143 (c) City, State, and ZIP Code Washington	(Includin ned committee, which i iled with the principal community Fund	g Joint Fu	ndraising	g Representatival campaign coree.	20003 and belief it is true, correct and complete. Date		
8. I hereby authorize the following nan candidacy. NOTE: This designation should be f (a) Name of Committee (in full) Hickenlooper Victor (b) Address (number and street) 611 Pennsylvania Ave SE Ste 143 (c) City, State, and ZIP Code Washington I certify that I have exa Signature of Candidate Hickenlooper, John, W., ,	(Includin ned committee, which i iled with the principal of the principal	g Joint Fu	ndraising r principa committe best of r	g Representativ al campaign cor ee. DC my knowledge a	20003 and belief it is true, correct and complete. Date 06/04/2025		
8. I hereby authorize the following nan candidacy. NOTE: This designation should be f (a) Name of Committee (in full) Hickenlooper Victor (b) Address (number and street) 611 Pennsylvania Ave SE Ste 143 (c) City, State, and ZIP Code Washington I certify that I have exa Signature of Candidate Hickenlooper, John, W., ,	(Includin ned committee, which i iled with the principal of the principal	g Joint Fu	ndraising r principa committe best of r	g Representativ al campaign cor ee. DC my knowledge a	20003 and belief it is true, correct and complete. Date		
8. I hereby authorize the following nan candidacy. NOTE: This designation should be f (a) Name of Committee (in full) Hickenlooper Victor (b) Address (number and street) 611 Pennsylvania Ave SE Ste 143 (c) City, State, and ZIP Code Washington I certify that I have exa Signature of Candidate Hickenlooper, John, W., ,	(Includin ned committee, which i iled with the principal of the principal	g Joint Fu	ndraising r principa committe best of r	g Representativ al campaign cor ee. DC my knowledge a	20003 and belief it is true, correct and complete. Date 06/04/2025		

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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Page	OI		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

3.	 I hereby authorize the following named committee, which is NOT my principal campaign candidacy. NOTE: This designation should be filed with the principal campaign comm 	by authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my dacy. NOTE : This designation should be filed with the principal campaign committee.				
	(a) Name of Committee (in full)					
	Peaches and Peaks Victory Fund					
	(b) Address (number and street)					
	611 Pennsylvania Ave SE					
	Num 143					
	(c) City, State, and ZIP Code	20003				
	Washington DC	20003				
3.	I hereby authorize the following named committee, which is NOT my principal campaig candidacy. NOTE: This designation should be filed with the principal campaign comm					
	(a) Name of Committee (in full)					
	Blue Spruce Victory Fund					
	(b) Address (number and street) 120 Maryland Ave					
	(c) City, State, and ZIP Code					
	Washington DC	20002				
3.	B. I hereby authorize the following named committee, which is NOT my principal campaign candidacy. NOTE: This designation should be filed with the principal campaign comm (a) Name of Committee (in full) Best of the West (b) Address (number and street) 611 Pennsylvania Ave SE Suite 143 (c) City, State, and ZIP Code Washington DC					
	washington	20003				
3.	3. I hereby authorize the following named committee, which is NOT my principal campaic candidacy. NOTE: This designation should be filed with the principal campaign comm (a) Name of Committee (in full)	-				
	(b) Address (number and street)					