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STATEMENT OF **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. McCormick for Congress 2949 Breakwater Drive ADDRESS (number and street) (Check if address is changed) Longmont 80503 CO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mccormickforcongress@gmail.com (Check if address is changed) Optional Second E-Mail Address karenmccormickperry@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) http://mccormickforcongress.org (Check if address is changed) DATE 2017 C00648006 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. Wahl, Fran, , , Type or Print Name of Treasurer Wahl, Fran,,, [Electronically Filed] 06 16 2017 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 Only

Local 202-694-1100

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		OMMITTEE • 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.)				
Nam Cand	e of didate	McCormick, Karen, A, ,				
	didate / Affiliati	on DEM Office Sought: * House Senate President	State CO District 04			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Cand	e of didate					
Par	ty Con	nmittee:				
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Poli	tical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 secommittee. (i.e., nonconnected committee)	egregated 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.)				
Join	t Func	Iraising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political			
	Committees Participating in Joint Fundraiser					
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

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Write or Type Committee Nam	е	
McCormick for	Congress	
6. Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	ership PAC Sponsor
NONE		
Mailing Address		
Ç		
	CITY STATE	ZIP CODE
	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Ide books and records.	ntify by name, address (phone number optional) and position of the person in	possession of committee
Wahl, Fra	n, , ,	
Mailing Address	3137 Marlin Drive	
Mailing Address		
	Longmont CO 8050	3
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 303	621 - 5855
Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name Wahl, France of Treasurer	n, , ,	
Mailing Address	3137 Marlin Drive	
	Longmont CO 8050	3
Title or Position	CITY STATE	ZIP CODE

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Full Name of Designated	McCormick, Karen, A, ,						
Agent	2949 Breakwater Drive						
Mailing Address							
	Longmont CO 80503 CITY STATE ZI	IP CODE					
Title or Position		19 - 2502					
safety deposit bo	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.						
	Vectra Bank Colorado						
Mailing Address	2011 Ken Pratt Blvd						
	Longmont CO 80501						
	CITY STATE Z	IP CODE					
Name of Bank, [Depository, etc.						
Mailing Address							
	CITY STATE Z	IP CODE					