Image# :	202405089645564329
----------	--------------------

05/08/2024 14 : 56

STATEMENT	OF
ORGANIZATI	ON

FEC FORM 1		STATEMEI ORGANIZ		0	PAGE 1 / 7
1. NAME OF COMMITTEE (ir	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number a	nd street)	1580 Lincoln St			
(Check if a is changed		Suite 520			
	<i></i>)	Denver └ └ └ └ └ └ └ └ └ └ └ └		CO STATE ▲	203-1517 – ZIP CODE ▲
COMMITTEE'S E-MA		SS			
(Check if a is changed		ops@uniteamerica.org			
-		Optional Second E-Mail Ad	dress		
COMMITTEE'S WEB	address	RESS (URL)			
is changed	(1				
	5 08		00677773		
3. FEC IDENTIFIC	CATION NU	MBER 🕨 🖸 🤇			
4. IS THIS STATEM	MENT	NEW (N) OR	× AMENDED (A)		
I certify that I have e	examined thi	s Statement and to the best	of my knowledge and belief it	is true, correct and	complete.
Type or Print Name	of Treasurer	Phillips, Justin, , ,			
Signature of Treasure	er Phillip	s, Justin, , ,		Date 05	08 / Y Y Y Y Y 08
NOTE: Submission of	false, errone		may subject the person signing TION SHOULD BE REPORTED		penalties of 52 U.S.C. §30109
Office Use Only			For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

	-						
FE	EC Form 1	I (Revised 03/2022)					Page 2
5.	TYPE O	F COMMITTEE:					
	Candid	ate Committee:					
	(a)	This committee is a principal	campaign comi	mittee. (Complete	the candidate info	ormation below.)	
	(b)	This committee is an authorizinformation below.)	ed committee, a	and is NOT a pri	incipal campaign c	ommittee. (Complete t	he candidate
	Name Candio						
	Candio Party	date Affiliation	Office Sought:	House	Senate	President	State
	(c)	This committee supports/oppo	ses only one c	andidate, and is	NOT an authorize	d committee.	
	Nam Cano	e of Jidate					
	Party C	Committee: This committee is a		nal, State ordinate) committ	ee of the	(Democrat Republicar	ic, n, etc.) Party
	Politica	I Action Committee (PAC):				
	(e)	This committee is a separate	segregated fun	d. (Identify conne	ected organization	on line 6.) Its connect	ed organization is a:
		Corporation		Corporation w	ı/o Capital Stock	Labor	Organization
		Membership Organization	ı E	Trade Associa	ition	Cooper	ative
		In addition, this com	mittee is a Lot	obyist/Registrant	PAC.		
	(f)	This committee supports/oppo committee. (i.e., nonconnected		one Federal can	ididate, and is NO	T a separate segregate	ed fund or party
		In addition, this com	mittee is a Lot	obyist/Registrant	PAC.		
		In addition, this com	mittee is a Lea	adership PAC. (Id	entify sponsor on	line 6.)	

- (g) This committee is an independent expenditure-only political committee (Super PAC).
 - In addition, this committee is a Lobbyist/Registrant PAC.

(h) X This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

(i) 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.
 (j) 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.
 Committees Participating in Joint Fundraiser
 2.

	FEC Form 1 (Revised 02	2/2009)												Pa	ge 3		
W	rite or Type Committee Name																
	UNITE AMERICA	A PAC INC.															
6.	Name of Any Connected Or	ganization, Affiliated C	ommittee, 、	Joint	Fund	draisin	g Re	pres	entati	ive, c	or Le	ader	ship	PAC	Spc	onsor	
	Mailing Address	1550 Larimer St															
		Suite 524															
		Denver						l	CO		80	0202-	1602				
			CITY 🔺					S	TATE				ZIF	o co	DE 🖌	•	
	Relationship: Connected	Organization X Affiliate	d Organizatio	on	J	oint Fu	ndrai	sing R	epres	entat	ive		Lead	dershi	p PA	C Spo	onso

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Hatch, Amb	per, , ,
Full Name	
Mailing Address	1580 N Lincoln St
	Ste 520
	Denver CO 80203-1517 - - - -
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Custodian of Records	Telephone number 720 - 346 - 0743

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Phillips, Justin, , ,
Mailing Address	205 Pennsylvania Ave SE
	Washington DC 20003-1164
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Image:

FEC Form 1 (Revised	d 02/2009)
---------------------	------------

Full Name of Designated Agent	Hatch, Amber, , ,
Mailing Address	1580 N Lincoln St
	Ste 520
	Denver CO 80203-1517
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
Assistant Treasu	rer Telephone number 720 346 0743

9. 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.

	Wells Fargo		
Mailing Address	1701 Lincoln Street		
	Unit 100		
	Denver	CO 80203	
	CITY 🔺	STATE ▲	ZIP CODE ▲
Name of Bank,	Depository, etc.		
Mailing Address			
	CITY 🔺	STATE A	ZIP CODE ▲

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`=H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

This amendment is being done to change the name of the affiliated PAC and clarify Assistant Treasurer. Consistent with the stipulated judgment in Carey v. FEC, this committee intends to establish a separate bank account to deposit and withdraw funds raised in unlimited amounts from individuals, corporations, labor organizations, and/or other political committees. The funds maintained in this separate account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

Form/Schedule: Transaction ID: FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising I	Participant:		
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	C
4.			FEC ID number	С
	of Any Connected Or e America Reform F	rganization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
М	ailing Address	1580 Lincoln St, Suite 520		
	l			
	l	Denver		80203-
R	elationship:		STATE A	ZIP CODE
_	O'Neill, Rob	y name, address (phone number – optional) by, , ,		
Full	Name	1580 N Lincoln St		
Mail	ling Address			
	1	Ste 520		
	l			80203-1517
	l	Denver		
	LE OR POSITION ▼ signated Agent	Denver CITY	STATE ▲	$\begin{bmatrix} 80203-1517 \\ 0 & 0 & 0 \end{bmatrix} = \begin{bmatrix} 80203-1517 \\ 0 & 0 & 0 \end{bmatrix}$ $ZIP CODE \blacktriangle$
Des . Banks (or Other Depositories leposit boxes or maint	Denver CITY ▲ Te s: List all banks or other depositories in which rains funds.	STATE ▲	$ZIP CODE \blacktriangle$ $720 - 592 - 0843$

 FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h). Joint Fundraising	g Participant:	
	1		FEC ID number
	2.		FEC ID number
	3.		FEC ID number C
	4.		FEC ID number
_			
6. N	-	Organization, Affiliated Committee, Joint Fundra	ising Representative, or Leadership PAC Sponsor
	Republic Renewal		
	Mailing Address	1550 Larimer St	
		Suite 524	
		Denver	CO 80202-1602
	Relationship:		STATE A ZIP CODE A
	Connected	Organization × Affiliated Committee	Fundraising Representative
_			
8. D	esignated Agent: Identify	by name, address (phone number - optional)	
8. D e	esignated Agent: Identify	by name, address (phone number - optional)	
8. D		by name, address (phone number - optional)	
8. D (Full Name	by name, address (phone number - optional)	
8. D	Full Name	by name, address (phone number - optional)	
8. D (Full Name		
8. D (Full Name		
8. D (Full Name		
9. B i	Full Name		
9. B i	Full Name		ephone Number
9. B a sa Na	Full Name		ephone Number
9. B a sa Na	Full Name Mailing Address TITLE OR POSITION		ephone Number
9. B a sa Na	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc		ephone Number
9. B a sa Na	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc		ephone Number