Image# 12951240373 PAGE 1 / 4

FEC FORM 1			ATEM RGANI										
									Off	ice Use C	nly		
1. NAME OF COMMITTEE (in	full)		heck if name changed)		ample:If ty r the lines		1	2FE4	М5				
Pace for C	ongre	ess											
ADDRESS (number a	nd street)	PO Box 1	510										
(Check if ad	ddraee												
is changed)		Pueblo						СО	810	02			
				CITY			S	TATE		ZIP	COD	Ε	
COMMITTEE'S E-MA (Check if is change) COMMITTEE'S WEB (Check if is change)	address d) PAGE AD address d)	bmstraw DRESS (UR	@msn.com	C004970									
 FEC IDENTIFIC IS THIS STATE 			N) OR			ENDED (A	()						
I certify that I have e			,	_	_			rue co	rect and	comple			
			telle Davis	occi ci my	nnomeag.	o ana bon		, uo, oo,	root and	compre			
Type or Print Name	of Ireasure	er <u>ocan man</u>	tolio Bavio										
Signature of Treasure	Jean M	artelle Davis			[Electron	ically Filed	<i>d]</i> Da	te	03	19		20	12
NOTE: Submission of	false, erron		mplete informa SE IN INFORM			_	_			penalties	of 2 U	J.S.C.	§437g.
Office						er information		ct:		FEC I	FOR	<u> </u>	

L	Office Use Only				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)
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FEC F	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE	
(a) X	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 Candidate	Salvatore Pace II	
Candidate Party Affilia	tion DEM Office Sought: X House Senate President	State CO District 03
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		(Democratic,
(d)	· · · · ·	Republican, etc.) Party.
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor-	nected 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.)	
Joint Fun	draising 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
Cor	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.		
4		

FEC Form 1 (Revised (02/2009)	Page 3
Write or Type Committee Name		
Pace for Congre	ess	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	p PAC Sponsor
Red to Blue Majority F	und	
	PO Box 1174	
Mailing Address		
	Springfield VA 22151	
	CITY STATE ZI	IP CODE
Relationship: Connected	I Organization Affiliated Committee X Joint Fundraising Representative Leade	ership PAC Sponsor
Totalonomp.	- Significantly and a second an	
7. Custodian of Records: Ider	tify by name, address (phone number optional) and position of the person in posse	assion of committee
books and records.	any by name, dualess (phone namber — sphonal) and position of the person in position	,531011 OF COMMITMEC
I		ı
Full Name		
Mailing Address		
Title or Position	CITY STATE ZI	P CODE
	Telephone number	
9 Transurary List the name and	d address (phone number optional) of the treasurer of the committee; and the name	and address of
 Treasurer: List the name and any designated agent (e.g., a 	raduress (priorie number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
Full Name Jean Marte	elle Davis	
of Treasurer		
Mailing Address	PO Box 1510	
	Pueblo CO 81002	
Title or Position	CITY STATE ZII	P CODE
Treasurer	Telephone number	
	'	

1 20 1 011	n 1 (Revised 02/2009)	Page 4
Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Name of Bank, I		
Name of Bank, I	Depository, etc. Bank of America 730 15th St NW	ZIP CODE
Name of Bank, I	Depository, etc. Bank of America 730 15th St NW DC 20005 Washington DC 20005 CITY STATE	
Name of Bank, I	Depository, etc. Bank of America 730 15th St NW DC 20005 Washington DC 20005 CITY STATE	
Name of Bank, I	Depository, etc. Bank of America 730 15th St NW DC 20005 Washington DC 20005 CITY STATE	
Name of Bank, I	Depository, etc. Bank of America 730 15th St NW DC 20005 Washington DC 20005 CITY STATE	
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