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. Romanoff for Congress PO Box 783 ADDRESS (number and street) (Check if address is changed) 80040 CO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS tmoorecompliance@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.andrewromanoff.com/ (Check if address is changed) DATE 2013 C00541607 FEC IDENTIFICATION NUMBER > 3. X 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. Michael Hamrick Type or Print Name of Treasurer Michael Hamrick [Electronically Filed] 05 2014 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

ı	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
		COMMITTEE				
Can		e Committee:				
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below	2.)			
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name Cand		Andrew Romanoff				
Cand		Office Sought: X House Senate President	State			
Party	Affiliati	on DEM Sought: X House Senate President	District 06			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand						
Part	y Con	nmittee:				
(d)		This committee is a (National, State (Democratic, Republican, etc.) Party.				
Poli	tical A	action Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party committee. (i.e., nonconnected committee)				
		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	draising 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political			
	Com	umittees Participating in Joint Fundraiser				
	1.	FEC ID number C				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

FFC F arra 1 ()	Davide of 03/3000)	Dana 2						
Write or Type Committ	Revised 02/2009)	Page 3						
	or Congress							
6. Name of Any Con	nected Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hip PAC Sponsor						
Colorado 6th Vio	ctory Fund							
Adailia a Adalas a	3263 S. Grape Street							
Mailing Address								
	Denver							
	CITY STATE	ZIP CODE						
Relationship:	Connected Organization Affiliated Committee X Joint Fundraising Representative Le	adership PAC Sponsor						
	rds: Identify by name, address (phone number optional) and position of the person in po	ssession of committee						
books and records.								
T Full Name	Tracie Moore							
3104 Lowell Boulevard								
Mailing Address								
	Denver , CO , 80211							
Title or Position	CITY STATE	ZIP CODE						
Asst. Treasurer	314 _	401 0501						
	Telephone number							
8. Treasurer: List the	name and address (phone number optional) of the treasurer of the committee; and the na	ame and address of						
any designated age	nt (e.g., assistant treasurer).							
	lichael Hamrick	1						
of Treasurer	6477 S. Jericho Way							
Mailing Address								
	Centennial CO 80016							
Title or Position	CITY STATE	ZIP CODE						
Treasurer	Telephone number	518 - 1733						
I								

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Full Name of Designated Agent Tracie	e Moore						
Mailing Address	3104 Lowell Boulevard						
	Denver	CO 80	0211 ZIP CODE				
Title or Position Asst Treasurer		ephone number 314	_ 401 0501				
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.							
Firs	t Bank						
Mailing Address	2300 S. Havana St.						
	Aurora	CO 80	0014				
	CITY	STATE	ZIP CODE				
Name of Bank, Deposito	ory, etc.						
Mailing Address							
	CITY	STATE					