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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Conservative Leadership for Colorado 12650 W 64th Ave ADDRESS (number and street) Unit E-242 (Check if address is changed) Arvada 80004 CO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS tmoose@hdafec.com (Check if address is changed) Optional Second E-Mail Address llisker@hdafec.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 03 2022 C00803684 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. Moose, Taylor, , , Type or Print Name of Treasurer Moose, Taylor, , , [Electronically Filed] 02 03 2022 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

FI	FC Fo	rm 1 (Revised 02/2009)	Page 2		
TYPE	OF C	OMMITTEE	1 ago 2		
Cano	didate	Committee:			
(a)	Ш	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.)			
Name Candi					
Candid Party	date Affiliati	Office Sought: House Senate President	State		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name Candid					
Party	y Con	nmittee:			
(d)		· · · · · · · · · · · · · · · · · · ·	(Democratic, Republican, etc.) Party.		
Politi	ical A	ction Committee (PAC):			
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	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)	x	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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	Fund	raising 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.	o 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		
	Com	mittees 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 Name	. ago C
Conservative Leadership for Colorado	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Rep	presentative, or Leadership PAC Sponsor
NONE	
Mailing Address	
CITY	STATE ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising	g Representative Leadership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and posit books and records. 	tion of the person in possession of committee
Moose, Taylor, , , Full Name	
228 S Washington St	
Mailing Address Ste 115	
Alexandria	VA 22314
Title or Position CITY	STATE ZIP CODE
Treasurer Telephone nui	mber 703 - 549 - 7705
 Treasurer: List the name and address (phone number optional) of the treasurer of the any designated agent (e.g., assistant treasurer). 	e committee; and the name and address of
Full Name Moose, Taylor, , ,	I
of Treasurer	
Mailing Address Ste 115	
	1.1/4 122214
Alexandria CITY	VA 22314 -
Title or Position Treasurer Title or Position Treasurer Telephone nur	. 703 549 7705 .

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Full Name of Designated Agent		-
Mailing Address		
Ů		
	CITY STATE Z	IP CODE
Title or Position		
Name of Bank, I	Chain Bridge Bank 1445 A Laughlin Ave	
	McLean VA 22101	
	CITY STATE Z	IP CODE
Name of Bank, I	Depository, etc.	
Mailing Address		
	CITY STATE Z	IP CODE

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: