



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**COLORADO REPUBLICAN COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2025"/>	<input type="text"/>	<input type="text" value="239773.31"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="74355.81"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="78741.35"/>	<input type="text" value="280362.34"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="153097.16"/>	<input type="text" value="520135.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="68565.31"/>	<input type="text" value="435603.80"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="84531.85"/>	<input type="text" value="84531.85"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="104813.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**COLORADO REPUBLICAN COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	60942.36	152534.50
(ii) Unitemized .....	10914.27	10914.27
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	71856.63	163448.77
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1180.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	72856.63	164628.77
12. Transfers From Affiliated/Other Party Committees.....	5000.00	62562.37
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	64.41	16324.79
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	820.31	36846.41
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	78741.35	280362.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	78741.35	280362.34

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	68565.31	376257.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	68565.31	376257.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	57562.37
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1784.20
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1784.20
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	68565.31	435603.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	68565.31	435603.80

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	72856.63	164628.77
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1784.20
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	72856.63	162844.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	68565.31	376257.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	64.41	16324.79
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	68500.90	359932.44

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 104  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. ALEXANDER, KELSEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2075 MARLIN WAY  
 City CASTLE ROCK State CO Zip Code 80109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FORESTRY-INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2025  
**Transaction ID : SA11AI.156729559**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. ANDREWS, SUZANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 710 LIMA ST  
 City AURORA State CO Zip Code 80010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 04 / 12 / 2025  
**Transaction ID : SA11AI.156361322**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. ANDREWS, SUZANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 710 LIMA ST  
 City AURORA State CO Zip Code 80010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 05 / 12 / 2025  
**Transaction ID : SA11AI.156361419**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1100.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. ANDREWS, SUZANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 710 LIMA ST  
 City AURORA State CO Zip Code 80010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 06 / 12 / 2025  
**Transaction ID : SA11AI.156711396**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. BLACK, SHANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4542 SONGGLEN CIR  
 City COLORADO SPRINGS State CO Zip Code 80906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 04 / 15 / 2025  
**Transaction ID : SA11AI.156361327**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. BLACK, SHANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4542 SONGGLEN CIR  
 City COLORADO SPRINGS State CO Zip Code 80906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 05 / 12 / 2025  
**Transaction ID : SA11AI.156361420**  
 Amount of Each Receipt this Period 60.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	310.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. BLACK, SHANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4542 SONGGLEN CIR  
 City COLORADO SPRINGS State CO Zip Code 80906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 05 / 18 / 2025  
**Transaction ID : SA11AI.156361438**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. CARLSON, JEFFERY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 55 STORM KING RD  
 City GLENWOOD SPRINGS State CO Zip Code 81601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 06 / 30 / 2025  
**Transaction ID : SA11AI.156416942**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**C. CLASSEN, VERN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9911 W ATHENS LN  
 City LITTLETON State CO Zip Code 80127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 343.16

Date of Receipt 05 / 20 / 2025  
**Transaction ID : SA11AI.156361443**  
 Amount of Each Receipt this Period 62.49  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2162.49
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 104  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. COUEY, CARRIE, , ,**

Mailing Address 6275 COUNTY ROAD 315

City SILT	State CO	Zip Code 81652
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARFIELD COUNTY	Occupation (for Individual) TREASURER
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 518.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 16 / 2025

**Transaction ID : SA11AI.156361340**

Amount of Each Receipt this Period  
 518.45

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. DIXON, JULIANNA, , ,**

Mailing Address 38 SUNSET DR

City ENGLEWOOD	State CO	Zip Code 80113
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2025

**Transaction ID : SA11AI.156416941**

Amount of Each Receipt this Period  
 500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. DRAGO, SANDY, , ,**

Mailing Address 3210 S UNIVERSITY BLVD

City DENVER	State CO	Zip Code 80210
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
 259.38

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 28 / 2025

**Transaction ID : SA11AI.156361361**

Amount of Each Receipt this Period  
 259.38

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1277.83
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. DRULARD, KATHY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10452 W 77TH PL  
 City ARVADA State CO Zip Code 80005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 06 / 2025  
**Transaction ID : SA11AI.156361298**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. DURAY, CHUCK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9195 N ELLICOTT HWY  
 City CALHAN State CO Zip Code 80808  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ARTILLERY FARM LLC Occupation (for Individual) RANCHER OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 574.99

Date of Receipt 05 / 16 / 2025  
**Transaction ID : SA11AI.156361435**  
 Amount of Each Receipt this Period 62.49  
 Memo Item

**C. EIDSNES, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2765 COUNTY ROAD 21  
 City FORT LUPTON State CO Zip Code 80621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TRANSWEST INC. Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 30 / 2025  
**Transaction ID : SA11AI.156493292**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10562.49
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 104  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ELLIOTT, RAY, , ,**

Mailing Address **3421 W DARTMOUTH AVE**

City **DENVER**   State **CO**   Zip Code **80236**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED**   Occupation (for Individual) **RETIRED**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**05 / 27 / 2025**

**Transaction ID : SA11AI.156361458**

Amount of Each Receipt this Period  
**500.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ELMONT, KATHRYN, , ,**

Mailing Address **PO BOX 589**

City **OURAY**   State **CO**   Zip Code **81427**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED**   Occupation (for Individual) **RETIRED**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**04 / 03 / 2025**

**Transaction ID : SA11AI.156361282**

Amount of Each Receipt this Period  
**50.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ELMONT, KATHRYN, , ,**

Mailing Address **PO BOX 589**

City **OURAY**   State **CO**   Zip Code **81427**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED**   Occupation (for Individual) **RETIRED**

Receipt For:  
 Primary    General  
 Other (specify)

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**05 / 03 / 2025**

**Transaction ID : SA11AI.156361385**

Amount of Each Receipt this Period  
**50.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **600.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. ELMONT, KATHRYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 589

City OURAY	State CO	Zip Code 81427
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 03 / 2025  
**Transaction ID : SA11AI.156361475**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. GANAHL, HEIDI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9511 SILENT HILLS LN

City LONE TREE	State CO	Zip Code 80124
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ENTREPRENEUR	Occupation (for Individual) ENTREPRENEUR
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1296.42

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2025  
**Transaction ID : SA11AI.156361328**

Amount of Each Receipt this Period  
259.38

Memo Item

**C. GINSBERG, JON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35 W MAIN ST  
 UNIT 1521

City FRISCO	State CO	Zip Code 80443
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMPUTER REPAIR DOCTOR	Occupation (for Individual) COMPUTER ENGINEER
---	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2025  
**Transaction ID : SA11AI.156361464**

Amount of Each Receipt this Period  
60.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	369.38
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. HANEY, PERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7600 LANDMARK WAY  
 UNIT 505  
 City GREENWOOD VILLAGE State CO Zip Code 80111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ORTHOMED Occupation (for Individual) PHYSICIANCEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 518.45

Date of Receipt **05 / 13 / 2025**  
**Transaction ID : SA11AI.156361422**  
 Amount of Each Receipt this Period 518.45  
 Memo Item

**B. HEGARTY, KELLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 195 LOCKES MOUNTAIN RD  
 City DURANGO State CO Zip Code 81301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) OIL & GAS ASSET MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 08 / 2025**  
**Transaction ID : SA11AI.156361309**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. HEGARTY, KELLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 195 LOCKES MOUNTAIN RD  
 City DURANGO State CO Zip Code 81301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) OIL & GAS ASSET MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 08 / 2025**  
**Transaction ID : SA11AI.156361403**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	668.45
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. HEGARTY, KELLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 195 LOCKES MOUNTAIN RD  
 City DURANGO State CO Zip Code 81301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) OIL & GAS ASSET MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 08 / 2025  
**Transaction ID : SA11AI.156361482**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. HITE, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1118  
 City GYPSUM State CO Zip Code 81637  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 518.45

Date of Receipt 05 / 11 / 2025  
**Transaction ID : SA11AI.156361413**  
 Amount of Each Receipt this Period 518.45  
 Memo Item

**C. HOFFMAN, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5308 S FRANKLIN CIR  
 City GREENWOOD VILLAGE State CO Zip Code 80121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 30 / 2025  
**Transaction ID : SA11AI.156729558**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	818.45
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. HOFFMAN, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5308 S FRANKLIN CIR  
 City GREENWOOD VILLAGE State CO Zip Code 80121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2025  
**Transaction ID : SA11Al.156364160**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. HOFFMAN, JOY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5308 S FRANKLIN CIR  
 City GREENWOOD VILLAGE State CO Zip Code 80121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2025  
**Transaction ID : SA11Al.156729560**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. HOFFMAN, JOY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5308 S FRANKLIN CIR  
 City GREENWOOD VILLAGE State CO Zip Code 80121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2025  
**Transaction ID : SA11Al.156364161**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2200.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 104  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. JACOWAY, DOAK, , ,**

Mailing Address 14 CANON CIR

City GREENWOOD VILLAGE State CO Zip Code 80111

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1036.58

Date of Receipt  
06 / 26 / 2025  
Transaction ID : SA11AI.156334457

Amount of Each Receipt this Period  
1036.58

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KECK, RICHARD, , ,**

Mailing Address 7407 PARK CIR

City BOULDER State CO Zip Code 80301

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FARMLAND PARTNERS Occupation (for Individual) SVP OF OPERATIONS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
05 / 14 / 2025  
Transaction ID : SA11AI.156361429

Amount of Each Receipt this Period  
60.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. LEFEBRE, BRADLEY, , ,**

Mailing Address 6456 S IVY CT

City CENTENNIAL State CO Zip Code 80111

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
358.66

Date of Receipt  
04 / 05 / 2025  
Transaction ID : SA11AI.156361291

Amount of Each Receipt this Period  
47.47

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1144.05

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. LEWEY, BEVERLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11796 STAGECOACH DR  
 City PARKER State CO Zip Code 80138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 04 / 09 / 2025  
**Transaction ID : SA11AI.156361311**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. LOUDEN, STEVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 200 UNION BLVD STE 200  
 City LAKEWOOD State CO Zip Code 80228  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SEVERY CREEK ROOFING Occupation (for Individual) CONSTRUCTION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.29

Date of Receipt 05 / 14 / 2025  
**Transaction ID : SA11AI.156361431**  
 Amount of Each Receipt this Period 228.29  
 Memo Item

**C. MCEWEN ALEXANDER, KELSEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2075 MARLIN WAY  
 City CASTLE ROCK State CO Zip Code 80109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) INVESTMENTS  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2025  
**Transaction ID : SA11AI.156364163**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1253.29
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 104  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. MEDVED, BECKY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1785 CANTWELL GRV  
 City COLORADO SPRINGS    State CO    Zip Code 80906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED    Occupation (for Individual) RETIRED  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 27 / 2025  
**Transaction ID : SA11AI.156361358**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. MOORE, DANNY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6110 S POTOMAC WAY  
 City CENTENNIAL    State CO    Zip Code 80111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DENOVO SOLUTIONS    Occupation (for Individual) OWNER  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5181.96

Date of Receipt 04 / 29 / 2025  
**Transaction ID : SA11AI.156361369**  
 Amount of Each Receipt this Period 2590.98  
 Memo Item

**C. MOORE, DANNY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6110 S POTOMAC WAY  
 City CENTENNIAL    State CO    Zip Code 80111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DENOVO SOLUTIONS    Occupation (for Individual) OWNER  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 5181.96

Date of Receipt 05 / 02 / 2025  
**Transaction ID : SA11AI.156361388**  
 Amount of Each Receipt this Period 2590.98  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5431.96  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 104
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. NEWVILLE, JEANETTE, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8942 MEADOW HILL CIR  
 City LONE TREE State CO Zip Code 80124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 05 / 2025  
**Transaction ID : SA11AI.156729553**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. ORMS, MARIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8496 PAWNEE RD  
 City PARKER State CO Zip Code 80134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CISCO SYSTEMS Occupation (for Individual) CYBERSECURITY ENGINEERING MA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 352.12

Date of Receipt 04 / 11 / 2025  
**Transaction ID : SA11AI.156361319**  
 Amount of Each Receipt this Period 52.12  
 Memo Item

**C. PERRY, PETER, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2778 W RIVERWALK CIR  
 UNIT B  
 City LITTLETON State CO Zip Code 80123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 01 / 2025  
**Transaction ID : SA11AI.156698977**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10552.12
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 OF 104 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. PHELAN, DARREL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10702 BISHOP RIDGE RD  
 City TRINIDAD State CO Zip Code 81082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ENTREPRENEUR Occupation (for Individual) ENTREPRENEUR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 518.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2025  
**Transaction ID : SA11AI.156361334**  
 Amount of Each Receipt this Period  
 518.45  
 Memo Item

**B. POLL, PAMELA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1016 N LOST HILLS LN  
 City PUEBLO WEST State CO Zip Code 81007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 28 / 2025  
**Transaction ID : SA11AI.156361370**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. POLL, PAMELA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1016 N LOST HILLS LN  
 City PUEBLO WEST State CO Zip Code 81007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2025  
**Transaction ID : SA11AI.156361466**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	568.45
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. POLL, PAMELA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1016 N LOST HILLS LN  
 City PUEBLO WEST State CO Zip Code 81007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 28 / 2025  
**Transaction ID : SA11AI.156358545**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. REEG, MICHAEL, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2330 N POWERS FRONTAGE RD  
 City COLORADO SPRINGS State CO Zip Code 80915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) BRICKLAYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 203.94

Date of Receipt 04 / 21 / 2025  
**Transaction ID : SA11AI.156361350**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. REEG, MICHAEL, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2330 N POWERS FRONTAGE RD  
 City COLORADO SPRINGS State CO Zip Code 80915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) BRICKLAYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 203.94

Date of Receipt 04 / 28 / 2025  
**Transaction ID : SA11AI.156361371**  
 Amount of Each Receipt this Period 103.94  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	228.94
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 104  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. RIEBE, CHARLES, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7700 W GRANT RANCH BLVD  
 UNIT 5D  
 City LITTLETON State CO Zip Code 80123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 29 / 2025  
**Transaction ID : SA11AI.156673542**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. ROBERTSON, ALLAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 291 W DAVIES AVE N  
 City LITTLETON State CO Zip Code 80120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 01 / 2025  
**Transaction ID : SA11AI.156361472**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. ROGERS, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1235 W 133RD CIR  
 City WESTMINSTER State CO Zip Code 80234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NOT-EMPLOYED Occupation (for Individual) NOT-EMPLOYED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 04 / 2025  
**Transaction ID : SA11AI.156361294**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 625.00  
**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:	PAGE 23 OF 104
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. ROGERS, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1235 W 133RD CIR  
 City WESTMINSTER State CO Zip Code 80234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NOT-EMPLOYED Occupation (for Individual) NOT-EMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 04 / 2025  
**Transaction ID : SA11AI.156361380**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. ROGERS, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1235 W 133RD CIR  
 City WESTMINSTER State CO Zip Code 80234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NOT-EMPLOYED Occupation (for Individual) NOT-EMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2025  
**Transaction ID : SA11AI.156361476**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. SAALBERG, VICTOR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4730 LANGDALE WAY  
 City COLORADO SPRINGS State CO Zip Code 80906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) HEALTH  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 01 / 2025  
**Transaction ID : SA11AI.156361283**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. SCRIVANICH, REBECCA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7503 E SUNSET TRL  
 City PARKER State CO Zip Code 80134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SUR LA TABLE Occupation (for Individual) CHEF INSTRUCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2522.39

Date of Receipt 04 / 01 / 2025  
**Transaction ID : SA11AI.156361284**  
 Amount of Each Receipt this Period 1900.00  
 Memo Item

**B. TRUPPO, DARCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13982 E PRINCETON PL STE B  
 City AURORA State CO Zip Code 80014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) YOUR CASTLE REAL ESTATE Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 14 / 2025  
**Transaction ID : SA11AI.156361338**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. TRUPPO, DARCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13982 E PRINCETON PL STE B  
 City AURORA State CO Zip Code 80014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) YOUR CASTLE REAL ESTATE Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 14 / 2025  
**Transaction ID : SA11AI.156361433**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 104  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. TRUPPO, DARCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13982 E PRINCETON PL  
 STE B  
 City AURORA State CO Zip Code 80014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) YOUR CASTLE REAL ESTATE Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2025  
**Transaction ID : SA11AI.156077435**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. WALKER, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 STEVENS CIR  
 City PAGOSA SPRINGS State CO Zip Code 81147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 01 / 2025  
**Transaction ID : SA11AI.156361286**  
 Amount of Each Receipt this Period 600.00  
 Memo Item

**C. WEBB, CYNTHIA, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2162 E DARTMOUTH AVE  
 City ENGLEWOOD State CO Zip Code 80113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REALTOR  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 05 / 2025  
**Transaction ID : SA11AI.156729554**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1150.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 104  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WHITNEY, PAT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6414 OASIS BUTTE DR  
 City COLORADO SPRINGS    State CO    Zip Code 80923  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED    Occupation (for Individual) EDUCATION  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 20 / 2025  
**Transaction ID : SA11AI.156361351**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. WHITNEY, PAT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6414 OASIS BUTTE DR  
 City COLORADO SPRINGS    State CO    Zip Code 80923  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED    Occupation (for Individual) EDUCATION  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 20 / 2025  
**Transaction ID : SA11AI.156361448**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. WHITNEY, PAT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6414 OASIS BUTTE DR  
 City COLORADO SPRINGS    State CO    Zip Code 80923  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED    Occupation (for Individual) EDUCATION  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 20 / 2025  
**Transaction ID : SA11AI.156175782**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶  
**TOTAL** This Period (last page this line number only)..... ▶

75.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
WILLIAMSON, MICHAEL, , ,

Mailing Address 14424 W DARTMOUTH AVE

City LAKEWOOD	State CO	Zip Code 80228
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2025

**Transaction ID : SA11AI.156361352**

Amount of Each Receipt this Period  
50.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
WILLIAMSON, MICHAEL, , ,

Mailing Address 14424 W DARTMOUTH AVE

City LAKEWOOD	State CO	Zip Code 80228
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 21 / 2025

**Transaction ID : SA11AI.156361449**

Amount of Each Receipt this Period  
50.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
WILLIAMSON, MICHAEL, , ,

Mailing Address 14424 W DARTMOUTH AVE

City LAKEWOOD	State CO	Zip Code 80228
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 21 / 2025

**Transaction ID : SA11AI.156176019**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 104
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 01 / 2025

**Transaction ID : SA11Al.155923579**

Amount of Each Receipt this Period  
19.40

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 02 / 2025

**Transaction ID : SA11Al.155923578**

Amount of Each Receipt this Period  
24.01

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2025

**Transaction ID : SA11Al.155923577**

Amount of Each Receipt this Period  
10.57

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 OF 104
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2025

**Transaction ID : SA11AI.155923576**

Amount of Each Receipt this Period  
39.40

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2025

**Transaction ID : SA11AI.155923575**

Amount of Each Receipt this Period  
13.41

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2025

**Transaction ID : SA11AI.155923574**

Amount of Each Receipt this Period  
21.13

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2025

**Transaction ID : SA11AI.155923573**

Amount of Each Receipt this Period  
48.03

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. GROSS, PARVEEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 10758 COUNCIL FIRE

City LITTLETON	State CO	Zip Code 80125
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2025

**Transaction ID : SA11AI.155936917**

Amount of Each Receipt this Period  
50.00

Memo Item

EARMARKED THROUGH WINRED

**C. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2025

**Transaction ID : SA11AI.155923572**

Amount of Each Receipt this Period  
472.09

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. KECK, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7407 PARK CIR  
 City BOULDER State CO Zip Code 80301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FARMLAND PARTNERS Occupation (for Individual) SVP OF OPERATIONS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 04 / 15 / 2025  
**Transaction ID : SA11AI.155936936**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
**EARMARKED THROUGH WINRED**

**B. WINRED**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10038.79

Date of Receipt 04 / 18 / 2025  
**Transaction ID : SA11AI.155923571**  
 Amount of Each Receipt this Period 112.18  
 Memo Item  
**TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED**

**C. DAVIES, NICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2827 FLINT CT  
 City SUPERIOR State CO Zip Code 80027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) E-Z EXCAVATING INC Occupation (for Individual) CONSTRUCTION  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 16 / 2025  
**Transaction ID : SA11AI.155936930**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
**EARMARKED THROUGH WINRED**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2025

**Transaction ID : SA11AI.155923570**

Amount of Each Receipt this Period  
12.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. DURAY, CHUCK, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9195 N ELLICOTT HWY

City CALHAN	State CO	Zip Code 80808
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
ARTILLERY FARM LLC RANCHER OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
574.99

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		17		2025

**Transaction ID : SA11AI.155936929**

Amount of Each Receipt this Period  
12.50

Memo Item

EARMARKED THROUGH WINRED

**C. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2025

**Transaction ID : SA11AI.155923569**

Amount of Each Receipt this Period  
73.03

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12.50
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2025

**Transaction ID : SA11AI.155923568**

Amount of Each Receipt this Period  
24.01

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2025

**Transaction ID : SA11AI.155923567**

Amount of Each Receipt this Period  
26.92

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2025

**Transaction ID : SA11AI.155923566**

Amount of Each Receipt this Period  
165.21

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2025

**Transaction ID : SA11AI.155923565**

Amount of Each Receipt this Period  
70.30

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2025

**Transaction ID : SA11AI.155923564**

Amount of Each Receipt this Period  
24.01

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 04 / 2025

**Transaction ID : SA11AI.155923563**

Amount of Each Receipt this Period  
10.57

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2025

**Transaction ID : SA11AI.155923562**

Amount of Each Receipt this Period  
480.29

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. BRINKERHOFF, BOB, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 489 E 3RD AVE

City SPRINGFIELD	State CO	Zip Code 81073
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2025

**Transaction ID : SA11AI.155936860**

Amount of Each Receipt this Period  
250.00

Memo Item

EARMARKED THROUGH WINRED

**C. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2025

**Transaction ID : SA11AI.155923561**

Amount of Each Receipt this Period  
72.42

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2025

**Transaction ID : SA11AI.155923560**

Amount of Each Receipt this Period  
156.08

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2025

**Transaction ID : SA11AI.155923559**

Amount of Each Receipt this Period  
249.76

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C. EUDY, BARBARA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 243 TURNBERRY DR

City WINDSOR	State CO	Zip Code 80550
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2025

**Transaction ID : SA11AI.155936905**

Amount of Each Receipt this Period  
250.00

Memo Item

EARMARKED THROUGH WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2025

**Transaction ID : SA11AI.155923558**

Amount of Each Receipt this Period  
62.43

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2025

**Transaction ID : SA11AI.155923557**

Amount of Each Receipt this Period  
21.13

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2025

**Transaction ID : SA11AI.155923556**

Amount of Each Receipt this Period  
132.07

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. GROSS, PARVEEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10758 COUNCIL FIRE

City LITTLETON	State CO	Zip Code 80125
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2025

**Transaction ID : SA11AI.155936916**

Amount of Each Receipt this Period  
50.00

Memo Item  
EARMARKED THROUGH WINRED

**B. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2025

**Transaction ID : SA11AI.155923555**

Amount of Each Receipt this Period  
48.03

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2025

**Transaction ID : SA11AI.155923554**

Amount of Each Receipt this Period  
42.26

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 104
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2025

**Transaction ID : SA11AI.155923553**

Amount of Each Receipt this Period  
69.16

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. DAVIES, NICK, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2827 FLINT CT

City SUPERIOR	State CO	Zip Code 80027
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
E-Z EXCAVATING INC CONSTRUCTION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 16 / 2025

**Transaction ID : SA11AI.155936867**

Amount of Each Receipt this Period  
50.00

Memo Item

EARMARKED THROUGH WINRED

**C. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 21 / 2025

**Transaction ID : SA11AI.155923552**

Amount of Each Receipt this Period  
49.01

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2025

**Transaction ID : SA11AI.155923551**

Amount of Each Receipt this Period  
20.72

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2025

**Transaction ID : SA11AI.155923550**

Amount of Each Receipt this Period  
19.22

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2025

**Transaction ID : SA11AI.155923549**

Amount of Each Receipt this Period  
107.10

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2025

**Transaction ID : SA11AI.155923548**

Amount of Each Receipt this Period  
24.01

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2025

**Transaction ID : SA11AI.155923547**

Amount of Each Receipt this Period  
10.57

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2025

**Transaction ID : SA11AI.155923546**

Amount of Each Receipt this Period  
19.40

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2025

**Transaction ID : SA11AI.155923545**

Amount of Each Receipt this Period  
30.74

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2025

**Transaction ID : SA11AI.156077329**

Amount of Each Receipt this Period  
50.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**C. GROSS, PARVEEN, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10758 COUNCIL FIRE

City LITTLETON	State CO	Zip Code 80125
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
 RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2025

**Transaction ID : SA11AI.156077333**

Amount of Each Receipt this Period  
50.00

Memo Item

EARMARKED THROUGH WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2025

**Transaction ID : SA11AI.156099952**

Amount of Each Receipt this Period  
152.00

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. DAVIES, NICK, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 2827 FLINT CT

City SUPERIOR	State CO	Zip Code 80027
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
E-Z EXCAVATING INC CONSTRUCTION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2025

**Transaction ID : SA11AI.156099958**

Amount of Each Receipt this Period  
50.00

Memo Item  
EARMARKED THROUGH WINRED

**C. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2025

**Transaction ID : SA11AI.156191284**

Amount of Each Receipt this Period  
42.50

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 104
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2025

**Transaction ID : SA11AI.156275803**

Amount of Each Receipt this Period  
1072.04

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. GANAHL, HEIDI, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9511 SILENT HILLS LN

City LONE TREE	State CO	Zip Code 80124
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
ENTREPRENEUR ENTREPRENEUR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1296.42

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2025

**Transaction ID : SA11AI.156277868**

Amount of Each Receipt this Period  
516.53

Memo Item

EARMARKED THROUGH WINRED

**C. GANAHL, HEIDI, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9511 SILENT HILLS LN

City LONE TREE	State CO	Zip Code 80124
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
ENTREPRENEUR ENTREPRENEUR

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1296.42

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2025

**Transaction ID : SA11AI.156277869**

Amount of Each Receipt this Period  
520.51

Memo Item

EARMARKED THROUGH WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1037.04
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2025

**Transaction ID : SA11AI.156307829**

Amount of Each Receipt this Period  
107.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**B. MOORE, ROBERT, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12096 SONG BIRD HILLS ST

City PARKER	State CO	Zip Code 80138
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
SUPERMICRO MARKETING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2025

**Transaction ID : SA11AI.156307920**

Amount of Each Receipt this Period  
60.00

Memo Item

EARMARKED THROUGH WINRED

**C. WINRED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
10038.79

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2025

**Transaction ID : SA11AI.156416777**

Amount of Each Receipt this Period  
153.03

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 104
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. BLACK, SHANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4542 SONGGLEN CIR  
 City COLORADO SPRINGS State CO Zip Code 80906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 06 / 27 / 2025  
**Transaction ID : SA11AI.156416781**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
**EARMARKED THROUGH WINRED**

**B. WINRED**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10038.79

Date of Receipt 06 / 30 / 2025  
**Transaction ID : SA11AI.156859055**  
 Amount of Each Receipt this Period 221.16  
 Memo Item  
**TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED**

**C. WINRED**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10038.79

Date of Receipt 06 / 30 / 2025  
**Transaction ID : SA11AI.156430276**  
 Amount of Each Receipt this Period 1109.85  
 Memo Item  
**TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. BROWN, HANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 470 CIRCLE DR  
 City DENVER State CO Zip Code 80206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2025  
**Transaction ID : SA11AI.156431511**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 EARMARKED THROUGH WINRED

**B. CLASSEN, VERN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9911 W ATHENS LN  
 City LITTLETON State CO Zip Code 80127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 343.16

Date of Receipt 06 / 30 / 2025  
**Transaction ID : SA11AI.156431509**  
 Amount of Each Receipt this Period 62.46  
 Memo Item  
 EARMARKED THROUGH WINRED

**C. CLASSEN, VERN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9911 W ATHENS LN  
 City LITTLETON State CO Zip Code 80127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 343.16

Date of Receipt 06 / 30 / 2025  
**Transaction ID : SA11AI.156431508**  
 Amount of Each Receipt this Period 62.46  
 Memo Item  
 EARMARKED THROUGH WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	624.92
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 104
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. KECK, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7407 PARK CIR  
 City BOULDER State CO Zip Code 80301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FARMLAND PARTNERS Occupation (for Individual) SVP OF OPERATIONS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 06 / 30 / 2025  
**Transaction ID : SA11AI.156431510**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
**EARMARKED THROUGH WINRED**

**B. WINRED**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10038.79

Date of Receipt 06 / 30 / 2025  
**Transaction ID : SA11AI.156357802**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED**

**C. PAULS, BILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 SAINT PAUL ST  
 City DENVER State CO Zip Code 80206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PAULS CORP Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 26 / 2025  
**Transaction ID : SA11AI.156357806**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**EARMARKED THROUGH WINRED**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 104
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
WITTER, WILLIAM, , ,

Mailing Address 234 S 68TH ST

City BOULDER	State CO	Zip Code 80303
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		10		2025

**Transaction ID : SA11AI.156361321**

Amount of Each Receipt this Period  
10000.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
WOODFORD, STEPHEN, , ,

Mailing Address 115 HUNTINGTON PL

City COLORADO SPRINGS	State CO	Zip Code 80906
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WCM INDUSTRIES	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		14		2025

**Transaction ID : SA11AI.156364197**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10250.00
<b>TOTAL</b> This Period (last page this line number only).....	60942.36

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 104
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TELLER COUNTY REPUBLICAN PARTY**

Mailing Address **PO BOX 778**

City <b>DIVIDE</b>	State <b>CO</b>	Zip Code <b>80814</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06	/	06	/	2025

**Transaction ID : SA11C.156361480**

Amount of Each Receipt this Period  

1000.00
---------

 Memo Item  
**PERMISSIBLE FUNDS**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B.**

Mailing Address \_\_\_\_\_

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period  

--

 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**

Mailing Address \_\_\_\_\_

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period  

--

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>1000.00</b>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 104  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 17 / 2025

Transaction ID : SA12.156729561

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 104
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. ALPINE BANK**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 7TH STREET SOUTH

City RIFLE	State CO	Zip Code 81650
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
879.57

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2025

**Transaction ID : SA17.156673885**

Amount of Each Receipt this Period  
738.00

Memo Item  
INTEREST REVENUE

**B. ALPINE BANK**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 7TH STREET SOUTH

City RIFLE	State CO	Zip Code 81650
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
879.57

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2025

**Transaction ID : SA17.156190865**

Amount of Each Receipt this Period  
0.03

Memo Item  
INTEREST REVENUE

**C. ALPINE BANK**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 7TH STREET SOUTH

City RIFLE	State CO	Zip Code 81650
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
879.57

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2025

**Transaction ID : SA17.156618304**

Amount of Each Receipt this Period  
3.10

Memo Item  
INTEREST REVENUE

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	741.13
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 OF 104
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. ALPINE BANK**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 7TH STREET SOUTH

City RIFLE	State CO	Zip Code 81650
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
879.57

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2025

**Transaction ID : SA17.156698978**

Amount of Each Receipt this Period  
20.00

Memo Item  
INTEREST REVENUE

**B. ALPINE BANK**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 7TH STREET SOUTH

City RIFLE	State CO	Zip Code 81650
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
879.57

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2025

**Transaction ID : SA17.156699005**

Amount of Each Receipt this Period  
50.00

Memo Item  
INTEREST REVENUE

**C. ALPINE BANK**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 7TH STREET SOUTH

City RIFLE	State CO	Zip Code 81650
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
879.57

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2025

**Transaction ID : SA17.156190866**

Amount of Each Receipt this Period  
0.03

Memo Item  
INTEREST REVENUE

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.03
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 54 OF 104
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. ALPINE BANK</b>		Date of Receipt
Mailing Address 400 7TH STREET SOUTH		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2025"/>
City RIFLE	State CO	Zip Code 81650
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.156698350</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5.26"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="879.57"/>	<b>INTEREST REVENUE</b>

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ALPINE BANK</b>		Date of Receipt
Mailing Address 400 7TH STREET SOUTH		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2025"/>
City RIFLE	State CO	Zip Code 81650
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.156819547</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="0.03"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="879.57"/>	<b>INTEREST REVENUE</b>

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. ALPINE BANK</b>		Date of Receipt
Mailing Address 400 7TH STREET SOUTH		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2025"/>
City RIFLE	State CO	Zip Code 81650
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.156729537</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="3.86"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="879.57"/>	<b>INTEREST REVENUE</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="9.15"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value="820.31"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. 303 CREATIVE LLC**

Mailing Address 1942 BROADWAY  
STE 314C

City  
BOULDER

State  
CO

Zip Code  
80302

Purpose of Disbursement  
WEBSITE HOSTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	5		

FEC Identification Number

**C**

**Transaction ID : SB21B.10735**

Amount of Each Disbursement this Period

525.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ALLAN, GREG, , ,**

Mailing Address PO BOX 4585

City  
GREENWOOD VILLAGE

State  
CO

Zip Code  
80112

Purpose of Disbursement  
NON FEA PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	5		

FEC Identification Number

**C**

**Transaction ID : SB21B.10728**

Amount of Each Disbursement this Period

1555.68

Memo Item

Full Name (Last, First, Middle Initial)

**C. ALLAN, GREG, , ,**

Mailing Address PO BOX 4585

City  
GREENWOOD VILLAGE

State  
CO

Zip Code  
80112

Purpose of Disbursement  
NON FEA PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	5		

FEC Identification Number

**C**

**Transaction ID : SB21B.10728**

Amount of Each Disbursement this Period

1852.92

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3933.60

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ALLAN, GREG, , ,**

Mailing Address PO BOX 4585

City  
GREENWOOD VILLAGE

State  
CO

Zip Code  
80112

Purpose of Disbursement  
NON FEA PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	2	5

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

[Redacted] 2450.87

Memo Item

Full Name (Last, First, Middle Initial)

**B. ALLAN, GREG, , ,**

Mailing Address PO BOX 4585

City  
GREENWOOD VILLAGE

State  
CO

Zip Code  
80112

Purpose of Disbursement  
NON FEA PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	5

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

[Redacted] 1095.51

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMAZON**

Mailing Address 410 TERRY AVE N

City  
SEATTLE

State  
WA

Zip Code  
98108

Purpose of Disbursement  
SOFTWARE SUBSCRIPTIONS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10735**

Amount of Each Disbursement this Period

[Redacted] 54.95

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[Redacted] 3601.33

**TOTAL** This Period (last page this line number only)..... ▶

[Redacted]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. AMAZON**

Full Name (Last, First, Middle Initial)

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98108

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2025

FEC Identification Number: C

Transaction ID : SB21B.10735

Amount of Each Disbursement this Period: 191.98

Memo Item

**B. AMAZON**

Full Name (Last, First, Middle Initial)

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98108

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2025

FEC Identification Number: C

Transaction ID : SB21B.10739

Amount of Each Disbursement this Period: 53.66

Memo Item

**C. AMBANK**

Full Name (Last, First, Middle Initial)

Mailing Address 5291 EAST YALE AVE

City DENVER State CO Zip Code 80222

Purpose of Disbursement RENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 04 / 2025

FEC Identification Number: C

Transaction ID : SB21B.10725

Amount of Each Disbursement this Period: 8916.36

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9162.00

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 01 / 2025

FEC Identification Number  
**C**

Transaction ID : **SB21B.10725**

Amount of Each Disbursement this Period  
86.82

Memo Item

**B. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 02 / 2025

FEC Identification Number  
**C**

Transaction ID : **SB21B.10725**

Amount of Each Disbursement this Period  
1.53

Memo Item

**C. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 03 / 2025

FEC Identification Number  
**C**

Transaction ID : **SB21B.10725**

Amount of Each Disbursement this Period  
10.08

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 98.43

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		07		2025

FEC Identification Number

**C**

**Transaction ID : SB21B.10725**

Amount of Each Disbursement this Period

166.65

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		09		2025

FEC Identification Number

**C**

**Transaction ID : SB21B.10725**

Amount of Each Disbursement this Period

14.74

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2025

FEC Identification Number

**C**

**Transaction ID : SB21B.10725**

Amount of Each Disbursement this Period

27.91

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

209.30

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 11 / 2025

FEC Identification Number  
**C**

Transaction ID : **SB21B.10725**

Amount of Each Disbursement this Period  
11.96

Memo Item

**B. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 16 / 2025

FEC Identification Number  
**C**

Transaction ID : **SB21B.10725**

Amount of Each Disbursement this Period  
361.55

Memo Item

**C. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 16 / 2025

FEC Identification Number  
**C**

Transaction ID : **SB21B.10725**

Amount of Each Disbursement this Period  
8.11

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 381.62

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21B.10725

Amount of Each Disbursement this Period

55.87

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21B.10725

Amount of Each Disbursement this Period

23.25

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	3			2	0	2	5		

FEC Identification Number

**C** Transaction ID : SB21B.10725

Amount of Each Disbursement this Period

9.29

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

88.41

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2025

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10725**

Amount of Each Disbursement this Period

[Redacted]	11.96
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2025

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10736**

Amount of Each Disbursement this Period

[Redacted]	2.69
------------	------

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2025

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10736**

Amount of Each Disbursement this Period

[Redacted]	11.75
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Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[Redacted]	26.40
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[Redacted]	
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	1		2	0	2	5		

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

[Redacted] 123.35

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	5		2	0	2	5		

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

[Redacted] 4.84

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	7		2	0	2	5		

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

[Redacted] 100.77

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[Redacted] 228.96

**TOTAL** This Period (last page this line number only)..... ▶

[Redacted]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 07 / 2025

FEC Identification Number  
**C** Transaction ID : SB21B.10740

Amount of Each Disbursement this Period  
4.45

Memo Item

**B. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 09 / 2025

FEC Identification Number  
**C** Transaction ID : SB21B.10740

Amount of Each Disbursement this Period  
4.88

Memo Item

**C. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 13 / 2025

FEC Identification Number  
**C** Transaction ID : SB21B.10740

Amount of Each Disbursement this Period  
54.25

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 64.58

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

33.65

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

29.96

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

21.46

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

85.07

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 21 / 2025

FEC Identification Number  
**C**  
Transaction ID : SB21B.10740  
Amount of Each Disbursement this Period  
4.32

Memo Item

**B. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 22 / 2025

FEC Identification Number  
**C**  
Transaction ID : SB21B.10740  
Amount of Each Disbursement this Period  
13.65

Memo Item

**C. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 27 / 2025

FEC Identification Number  
**C**  
Transaction ID : SB21B.10740  
Amount of Each Disbursement this Period  
20.15

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 38.12

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

5.46

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

7.66

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

23.24

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

36.36

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	5

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10741**

Amount of Each Disbursement this Period

[Redacted]	15.02
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10741**

Amount of Each Disbursement this Period

[Redacted]	9.93
------------	------

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	5

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10741**

Amount of Each Disbursement this Period

[Redacted]	4.75
------------	------

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[Redacted]	29.70
------------	-------

[Redacted]	
------------	--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10741**

Amount of Each Disbursement this Period

37.13

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10741**

Amount of Each Disbursement this Period

6.55

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10741**

Amount of Each Disbursement this Period

6.16

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

49.84

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	2	5

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10741**

Amount of Each Disbursement this Period

[Redacted] 6.47

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10699**

Amount of Each Disbursement this Period

[Redacted] 18.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10699**

Amount of Each Disbursement this Period

[Redacted] 2.16

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[Redacted] 27.53

**TOTAL** This Period (last page this line number only)..... ▶

[Redacted]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10703**

Amount of Each Disbursement this Period

[Redacted] 2.05

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10705**

Amount of Each Disbursement this Period

[Redacted] 1.18

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	5

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.10705**

Amount of Each Disbursement this Period

[Redacted] 3.23

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[Redacted] 6.46

**TOTAL** This Period (last page this line number only)..... ▶

[Redacted]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET  
SUITE 1770

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2025

FEC Identification Number  
**C**

Transaction ID : **SB21B.10741**

Amount of Each Disbursement this Period  
39.50

Memo Item

**B. CAMPAIGNINBOX**

Full Name (Last, First, Middle Initial)

Mailing Address 601 NEW JERSEY AVE NW  
#7

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
FUNDRAISING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 10 / 2025

FEC Identification Number  
**C**

Transaction ID : **SB21B.10710**

Amount of Each Disbursement this Period  
1.00

Memo Item

**C. CAMPAIGNINBOX**

Full Name (Last, First, Middle Initial)

Mailing Address 601 NEW JERSEY AVE NW  
#7

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
FUNDRAISING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 18 / 2025

FEC Identification Number  
**C**

Transaction ID : **SB21B.10711**

Amount of Each Disbursement this Period  
5.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 45.50

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CARLSON, GREGORY, , ,**

Mailing Address 1151 PARK AVE

City  
CANON CITY

State  
CO

Zip Code  
81212

Purpose of Disbursement  
PARLIAMENTARIAN SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. COMCAST**

Mailing Address 1701 JFK BLVD

City  
PHILADELPHIA

State  
PA

Zip Code  
19103

Purpose of Disbursement  
WEB SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10735**

Amount of Each Disbursement this Period

357.49

Memo Item

Full Name (Last, First, Middle Initial)

**C. EXTRA DUTY SOLUTIONS**

Mailing Address 6 CORPORATE DR  
SUITE 830

City  
SHELTON

State  
CT

Zip Code  
06484

Purpose of Disbursement  
EVENT EXPENSE: SECURITY

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10735**

Amount of Each Disbursement this Period

2492.34

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3849.83

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043

Purpose of Disbursement  
OFFICE SOFTWARE SUBSCRIPTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	2	5

FEC Identification Number

C

Transaction ID : SB21B.10739

Amount of Each Disbursement this Period

33.86

Memo Item

Full Name (Last, First, Middle Initial)

**B. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043

Purpose of Disbursement  
OFFICE SOFTWARE SUBSCRIPTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

FEC Identification Number

C

Transaction ID : SB21B.10739

Amount of Each Disbursement this Period

151.28

Memo Item

Full Name (Last, First, Middle Initial)

**C. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043

Purpose of Disbursement  
OFFICE SOFTWARE SUBSCRIPTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	5

FEC Identification Number

C

Transaction ID : SB21B.10741

Amount of Each Disbursement this Period

65.67

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

250.81

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

City MOUNTAIN VIEW

State CA

Zip Code 94043

Purpose of Disbursement OFFICE SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10741

Amount of Each Disbursement this Period

[REDACTED] 151.28

Memo Item

Full Name (Last, First, Middle Initial)

**B. GRASSHOPPER**

Mailing Address 333 SUMMER ST

City BOSTON

State MA

Zip Code 02210

Purpose of Disbursement SOFTWARE SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 09 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10735

Amount of Each Disbursement this Period

[REDACTED] 17.79

Memo Item

Full Name (Last, First, Middle Initial)

**C. HAMPTON & PIGOTT LLP**

Mailing Address 390 INTERLOCKEN CRES SUITE 350

City BROOMFIELD

State CO

Zip Code 80021

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 03 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10725

Amount of Each Disbursement this Period

[REDACTED] 7734.30

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 7903.37

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HANNA, ALEC, , ,**

Mailing Address PO BOX 4585

City  
GREENWOOD VILLAGE

State  
CO

Zip Code  
80112

Purpose of Disbursement  
NON FEA PAYROLL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

2695.05

Memo Item

Full Name (Last, First, Middle Initial)

**B. HANNA, ALEC, , ,**

Mailing Address PO BOX 4585

City  
GREENWOOD VILLAGE

State  
CO

Zip Code  
80112

Purpose of Disbursement  
NON FEA PAYROLL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

2705.13

Memo Item

Full Name (Last, First, Middle Initial)

**C. HANNA, ALEC, , ,**

Mailing Address PO BOX 4585

City  
GREENWOOD VILLAGE

State  
CO

Zip Code  
80112

Purpose of Disbursement  
NON FEA PAYROLL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10741**

Amount of Each Disbursement this Period

2699.05

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

8099.23

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. HANNA, ALEC, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 4585

City GREENWOOD VILLAGE State CO Zip Code 80112

Purpose of Disbursement NON FEA PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 26 / 2025

FEC Identification Number: C

Transaction ID : SB21B.10741

Amount of Each Disbursement this Period: 2695.04

Memo Item

**B. KLENDALLEGAL LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1624 MARKET ST #202

City DENVER State CO Zip Code 80002

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2025

FEC Identification Number: C

Transaction ID : SB21B.10742

Amount of Each Disbursement this Period: 10000.00

Memo Item

**C. LIBERTY MUTUAL INSURANCE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 91013

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement INSURANCE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2025

FEC Identification Number: C

Transaction ID : SB21B.10735

Amount of Each Disbursement this Period: 1015.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 13710.04

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LUCK, SUSAN, , ,**

Mailing Address 959 M ST

City  
PENROSE

State  
CO

Zip Code  
81240

Purpose of Disbursement  
EVENT EXPENSE: CATERING SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2025

FEC Identification Number

**C**

**Transaction ID : SB21B.10729**

Amount of Each Disbursement this Period

163.98

Memo Item

Full Name (Last, First, Middle Initial)

**B. MAGGIANO'S RESTAURANT**

Mailing Address 7401 S CLINTON ST

City  
LYONS

State  
CO

Zip Code  
80112

Purpose of Disbursement  
EVENT EXPENSE: CATERING SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2025

FEC Identification Number

**C**

**Transaction ID : SB21B.10740**

Amount of Each Disbursement this Period

750.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MAGGIANO'S RESTAURANT**

Mailing Address 7401 S CLINTON ST

City  
LYONS

State  
CO

Zip Code  
80112

Purpose of Disbursement  
EVENT EXPENSE: CATERING SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2025

FEC Identification Number

**C**

**Transaction ID : SB21B.10742**

Amount of Each Disbursement this Period

1806.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2719.98

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE #5000

City  
ATLANTA

State  
GA

Zip Code  
30308

Purpose of Disbursement

EMAIL SERVICES

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	9			2	0	2	5		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10735

Amount of Each Disbursement this Period

[REDACTED] 684.95

Memo Item

Full Name (Last, First, Middle Initial)

### B. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE #5000

City  
ATLANTA

State  
GA

Zip Code  
30308

Purpose of Disbursement

EMAIL SERVICES

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	1			2	0	2	5		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10741

Amount of Each Disbursement this Period

[REDACTED] 633.45

Memo Item

Full Name (Last, First, Middle Initial)

### C. MARRIOTT INTERNATIONAL

Mailing Address 10400 FERNWOOD RD

City  
BETHESDA

State  
MD

Zip Code  
20817

Purpose of Disbursement

TRAVEL: LODGING

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	5		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10735

Amount of Each Disbursement this Period

[REDACTED] 472.89

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 1791.29

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARRIOTT INTERNATIONAL**

Mailing Address 10400 FERNWOOD RD

City  
BETHESDA

State  
MD

Zip Code  
20817

Purpose of Disbursement

TRAVEL: LODGING

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	5		

FEC Identification Number

**C**

**Transaction ID : SB21B.10735**

Amount of Each Disbursement this Period

472.89

Memo Item

Full Name (Last, First, Middle Initial)

**B. MARRIOTT INTERNATIONAL**

Mailing Address 10400 FERNWOOD RD

City  
BETHESDA

State  
MD

Zip Code  
20817

Purpose of Disbursement

TRAVEL: LODGING

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	5		

FEC Identification Number

**C**

**Transaction ID : SB21B.10735**

Amount of Each Disbursement this Period

472.89

Memo Item

Full Name (Last, First, Middle Initial)

**C. MARRIOTT INTERNATIONAL**

Mailing Address 10400 FERNWOOD RD

City  
BETHESDA

State  
MD

Zip Code  
20817

Purpose of Disbursement

TRAVEL: LODGING

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	5		

FEC Identification Number

**C**

**Transaction ID : SB21B.10735**

Amount of Each Disbursement this Period

472.89

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1418.67

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. MARRIOTT INTERNATIONAL**

Full Name (Last, First, Middle Initial)

Mailing Address 10400 FERNWOOD RD

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement TRAVEL: LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2025

FEC Identification Number: C

Transaction ID : SB21B.10735

Amount of Each Disbursement this Period: 472.89

Memo Item

**B. MICROSOFT**

Full Name (Last, First, Middle Initial)

Mailing Address ONE MICROSOFT WAY

City REDMOND State WA Zip Code 98052

Purpose of Disbursement SOFTWARE SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2025

FEC Identification Number: C

Transaction ID : SB21B.10735

Amount of Each Disbursement this Period: 118.95

Memo Item

**C. MICROSOFT**

Full Name (Last, First, Middle Initial)

Mailing Address ONE MICROSOFT WAY

City REDMOND State WA Zip Code 98052

Purpose of Disbursement SOFTWARE SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 21 / 2025

FEC Identification Number: C

Transaction ID : SB21B.10735

Amount of Each Disbursement this Period: 61.80

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 653.64

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICROSOFT**

Mailing Address ONE MICROSOFT WAY

City  
REDMOND

State  
WA

Zip Code  
98052

Purpose of Disbursement  
SOFTWARE SUBSCRIPTIONS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	2			2	0	2	5		

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.10741**  
Amount of Each Disbursement this Period  
[ ] 91.97 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. PATRIOT SOFTWARE**

Mailing Address 4883 DRESSLER RD NW

City  
CANTON

State  
OH

Zip Code  
44718

Purpose of Disbursement  
NON FEA PAYROLL TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	5		

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.10735**  
Amount of Each Disbursement this Period  
[ ] 462.14 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. PATRIOT SOFTWARE**

Mailing Address 4883 DRESSLER RD NW

City  
CANTON

State  
OH

Zip Code  
44718

Purpose of Disbursement  
NON FEA PAYROLL PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	2	5		

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.10735**  
Amount of Each Disbursement this Period  
[ ] 47.00 [ ]

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6	0	1	.	1	1
---	---	---	---	---	---

6	0	1	.	1	1
---	---	---	---	---	---

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. PATRIOT SOFTWARE

Mailing Address 4883 DRESSLER RD NW

City  
CANTON

State  
OH

Zip Code  
44718

Purpose of Disbursement  
NON FEA PAYROLL TAXES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		14		2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10735

Amount of Each Disbursement this Period

[REDACTED] 549.90

Memo Item

Full Name (Last, First, Middle Initial)

### B. PATRIOT SOFTWARE

Mailing Address 4883 DRESSLER RD NW

City  
CANTON

State  
OH

Zip Code  
44718

Purpose of Disbursement  
NON FEA PAYROLL PROCESSING FEES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10739

Amount of Each Disbursement this Period

[REDACTED] 47.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. PATRIOT SOFTWARE

Mailing Address 4883 DRESSLER RD NW

City  
CANTON

State  
OH

Zip Code  
44718

Purpose of Disbursement  
NON FEA PAYROLL TAXES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		05		2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10735

Amount of Each Disbursement this Period

[REDACTED] 818.43

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

[REDACTED] 1415.33

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. PATRIOT SOFTWARE**

Full Name (Last, First, Middle Initial)

Mailing Address 4883 DRESSLER RD NW

City CANTON State OH Zip Code 44718

Purpose of Disbursement  
NON FEA PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 19 / 2025

FEC Identification Number: C  
Transaction ID : SB21B.10740  
Amount of Each Disbursement this Period: 1182.97

Memo Item

**B. PATRIOT SOFTWARE**

Full Name (Last, First, Middle Initial)

Mailing Address 4883 DRESSLER RD NW

City CANTON State OH Zip Code 44718

Purpose of Disbursement  
NON FEA PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 29 / 2025

FEC Identification Number: C  
Transaction ID : SB21B.10740  
Amount of Each Disbursement this Period: 1182.97

Memo Item

**C. PATRIOT SOFTWARE**

Full Name (Last, First, Middle Initial)

Mailing Address 4883 DRESSLER RD NW

City CANTON State OH Zip Code 44718

Purpose of Disbursement  
NON FEA PAYROLL PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 13 / 2025

FEC Identification Number: C  
Transaction ID : SB21B.10741  
Amount of Each Disbursement this Period: 47.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2412.94

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PATRIOT SOFTWARE**

Mailing Address 4883 DRESSLER RD NW

City  
CANTON

State  
OH

Zip Code  
44718

Purpose of Disbursement  
NON FEA PAYROLL TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	7			2	0	2	5		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10741

Amount of Each Disbursement this Period

[REDACTED] 1162.18

Memo Item

Full Name (Last, First, Middle Initial)

**B. PATRIOT SOFTWARE**

Mailing Address 4883 DRESSLER RD NW

City  
CANTON

State  
OH

Zip Code  
44718

Purpose of Disbursement  
NON FEA PAYROLL TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	7			2	0	2	5		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10741

Amount of Each Disbursement this Period

[REDACTED] 1162.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. TAG**

Mailing Address 1201 WILSON BLVD  
27TH FLOOR

City  
ARLINGTON

State  
VA

Zip Code  
22209

Purpose of Disbursement  
FUNDRAISING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	2	5		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.1071C

Amount of Each Disbursement this Period

[REDACTED] 6.25

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 2330.63

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TEMPLE, LIZ, , ,**

Mailing Address 2509 EAST FLOYD AVE

City  
ENGLEWOOD

State  
CO

Zip Code  
80113

Purpose of Disbursement  
EXPENSE REIMBURSEMENT: SEE ITEMIZATION(S) IF REQUIRED

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		01		2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10729

Amount of Each Disbursement this Period

[REDACTED] 675.34

Memo Item

Full Name (Last, First, Middle Initial)

**B. COSTCO**

Mailing Address 999 LAKE DRIVE

City  
ISSAQUAH

State  
WA

Zip Code  
98027

Purpose of Disbursement  
TRAVEL: FOOD

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10729

Amount of Each Disbursement this Period

[REDACTED] 362.83

Memo Item

Full Name (Last, First, Middle Initial)

**C. EATON PIZZA AND SUBS**

Mailing Address 123 1ST ST

City  
EATON

State  
CO

Zip Code  
80615

Purpose of Disbursement  
TRAVEL: FOOD

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10725

Amount of Each Disbursement this Period

[REDACTED] 280.16

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 675.34

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HARBOR FREIGHT**

Mailing Address 26677 AGOURA RD

City  
CALABASAS

State  
CA

Zip Code  
91302

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10729**

Amount of Each Disbursement this Period

32.35

Memo Item

Full Name (Last, First, Middle Initial)

**B. WEINAND, PATRICK, , ,**

Mailing Address PO BOX 4585

City  
GREENWOOD VILLAGE

State  
CO

Zip Code  
80112

Purpose of Disbursement  
NON FEA PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10729**

Amount of Each Disbursement this Period

109.79

Memo Item

Full Name (Last, First, Middle Initial)

**C. WHISTLING PRAIRIE MGT**

Mailing Address 23814 COUNTY RD

City  
HASTY

State  
CO

Zip Code  
81044

Purpose of Disbursement  
EVENT EXPENSE: CATERING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

**C**

**Transaction ID : SB21B.10725**

Amount of Each Disbursement this Period

1600.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1709.79

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	5		

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

FEC Identification Number

C

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

0.80

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	2	5		

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

FEC Identification Number

C

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

0.99

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	2	5		

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

FEC Identification Number

C

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

0.43

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2.22

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		09		2025

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/ Type
-------------------

FEC Identification Number

C
---

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

1.62
------

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2025

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/ Type
-------------------

FEC Identification Number

C
---

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

0.59
------

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		11		2025

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/ Type
-------------------

FEC Identification Number

C
---

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

0.87
------

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3.08
------

**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement:  /  /

Mailing Address: 1776 WILSON BLVD  
SUITE 530

City: ARLINGTON State: VA Zip Code: 22219

Purpose of Disbursement:  MERCHANT FEES  
Candidate Name:  Category/Type:

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

FEC Identification Number:   
**Transaction ID : SB21B.10710**  
Amount of Each Disbursement this Period:   
 Memo Item

Full Name (Last, First, Middle Initial)  
**B. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement:  /  /

Mailing Address: 1776 WILSON BLVD  
SUITE 530

City: ARLINGTON State: VA Zip Code: 22219

Purpose of Disbursement:  MERCHANT FEES  
Candidate Name:  Category/Type:

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

FEC Identification Number:   
**Transaction ID : SB21B.10710**  
Amount of Each Disbursement this Period:   
 Memo Item

Full Name (Last, First, Middle Initial)  
**C. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement:  /  /

Mailing Address: 1776 WILSON BLVD  
SUITE 530

City: ARLINGTON State: VA Zip Code: 22219

Purpose of Disbursement:  MERCHANT FEES  
Candidate Name:  Category/Type:

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

FEC Identification Number:   
**Transaction ID : SB21B.10710**  
Amount of Each Disbursement this Period:   
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD  
SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[REDACTED] 0.50

Memo Item

Full Name (Last, First, Middle Initial)

### B. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD  
SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[REDACTED] 3.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD  
SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[REDACTED] 0.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 4.49

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: 04 / 25 / 2025

FEC Identification Number: C

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period: 2.08

Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: 04 / 25 / 2025

FEC Identification Number: C

Transaction ID : SB21B.10736

Amount of Each Disbursement this Period: 23.95

Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: 04 / 28 / 2025

FEC Identification Number: C

Transaction ID : SB21B.10711

Amount of Each Disbursement this Period: 6.79

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 32.82

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2025

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/ Type
-------------------

FEC Identification Number

C
---

Transaction ID : SB21B.10710  
Amount of Each Disbursement this Period

3.15
------

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2025

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/ Type
-------------------

FEC Identification Number

C
---

Transaction ID : SB21B.10710  
Amount of Each Disbursement this Period

0.99
------

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		05		2025

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/ Type
-------------------

FEC Identification Number

C
---

Transaction ID : SB21B.10710  
Amount of Each Disbursement this Period

0.43
------

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4.57
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 06 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[REDACTED] 19.71

Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[REDACTED] 2.99

Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 08 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[REDACTED] 6.42

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 29.12

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 09 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[REDACTED] 10.24

Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 12 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[REDACTED] 2.57

Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[REDACTED] 0.87

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 13.68

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	4		2	0	2	5		

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

FEC Identification Number

C

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

5.43

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	5		2	0	2	5		

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

FEC Identification Number

C

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

1.97

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	9		2	0	2	5		

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

FEC Identification Number

C

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

1.74

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

9.14

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[REDACTED] 2.84

Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 21 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[REDACTED] 2.02

Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 27 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[REDACTED] 2.28

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 7.14

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. WINRED TECHNICAL SERVICES LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 27 / 2025

FEC Identification Number  
**C**

**Transaction ID : SB21B.10739**

Amount of Each Disbursement this Period  
34.95

Memo Item

**B. WINRED TECHNICAL SERVICES LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 28 / 2025

FEC Identification Number  
**C**

**Transaction ID : SB21B.10710**

Amount of Each Disbursement this Period  
0.78

Memo Item

**C. WINRED TECHNICAL SERVICES LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 29 / 2025

FEC Identification Number  
**C**

**Transaction ID : SB21B.10711**

Amount of Each Disbursement this Period  
4.40

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 40.13

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		0	2		2	0	2	5		

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

FEC Identification Number

C [ ]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[ ] 0.99

Memo Item

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		0	4		2	0	2	5		

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

FEC Identification Number

C [ ]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[ ] 0.43

Memo Item

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		0	9		2	0	2	5		

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

FEC Identification Number

C [ ]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[ ] 0.80

Memo Item

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[ ] 2.22

**TOTAL** This Period (last page this line number only)..... ▶

[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10710

Amount of Each Disbursement this Period

[REDACTED] 1.26

Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 16 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10699

Amount of Each Disbursement this Period

[REDACTED] 1.97

Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 18 / 2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10701

Amount of Each Disbursement this Period

[REDACTED] 6.01

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 9.24

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD  
SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10708

Amount of Each Disbursement this Period

[REDACTED]	1.69
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Memo Item

Full Name (Last, First, Middle Initial)

### B. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD  
SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10711

Amount of Each Disbursement this Period

[REDACTED]	38.41
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Memo Item

Full Name (Last, First, Middle Initial)

### C. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD  
SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.10713

Amount of Each Disbursement this Period

[REDACTED]	4.22
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Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]	44.32
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[REDACTED]	
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2025

FEC Identification Number  
**C**

**Transaction ID : SB21B.10717**

Amount of Each Disbursement this Period  
80.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. X CORP**

Mailing Address 1355 MARKET ST  
SUITE 900

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
WEB SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 23 / 2025

FEC Identification Number  
**C**

**Transaction ID : SB21B.10741**

Amount of Each Disbursement this Period  
86.52

Memo Item

Full Name (Last, First, Middle Initial)

**C. ZOOM COMMUNICATIONS, INC.**

Mailing Address 55 ALMADEN BLVD  
SUITE 600

City SAN JOSE State CA Zip Code 95113

Purpose of Disbursement  
SOFTWARE SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 11 / 2025

FEC Identification Number  
**C**

**Transaction ID : SB21B.10735**

Amount of Each Disbursement this Period  
70.78

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 237.30

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**COLORADO REPUBLICAN COMMITTEE**

**A. ZOOM COMMUNICATIONS, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 55 ALMADEN BLVD  
SUITE 600

City SAN JOSE State CA Zip Code 95113

Purpose of Disbursement SOFTWARE SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 02 / 2025

FEC Identification Number: C [ ]  
**Transaction ID : SB21B.10741**

Amount of Each Disbursement this Period: [ ] 70.78

Memo Item

**B. ZOOM COMMUNICATIONS, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 55 ALMADEN BLVD  
SUITE 600

City SAN JOSE State CA Zip Code 95113

Purpose of Disbursement SOFTWARE SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 11 / 2025

FEC Identification Number: C [ ]  
**Transaction ID : SB21B.10741**

Amount of Each Disbursement this Period: [ ] 71.85

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C [ ]

Amount of Each Disbursement this Period: [ ]

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ [ ] 142.63

**TOTAL** This Period (last page this line number only)..... ▶ [ ] 68266.05

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**COLORADO REPUBLICAN COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**KLENDALLEGAL LLC**

Nature of Debt (Purpose):

LEGAL CONSULTING

Mailing Address 1624 MARKET ST  
#202

City  
DENVER

State  
CO

Zip Code  
80002

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4137

Amount Incurred This Period

104813.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

104813.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ▶

104813.00

2) **TOTALS** This Period (last page this line number only)..... ▶

104813.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

104813.00