FEC

Only

STATEMENT OF

PAGE 1 / 4

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. The Lion Pride 1226 Twin Peaks Cir. ADDRESS (number and street) (Check if address is changed) Longmont 80503 CO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS chris@phillips2016.org (Check if address is changed) Optional Second E-Mail Address buffaloprofessional@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.phillips2016.org (Check if address is changed) DATE 2015 C00587204 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Ms. Brittany Ballard Type or Print Name of Treasurer Ms. Brittany Ballard [Electronically Filed] 09 18 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate info	ormation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign conformation below.)	ommittee. (Complete the candidate
Name of Mr. Chris Phillips Candidate	
Candidate Office Party Affiliation IND Sought: House Senate X	State President
Jought. House Seriale	District
(c) This committee supports/opposes only one candidate, and is NOT an authorized	d committee.
Name of Candidate	
Party Committee:	(Domogratio
(Mational, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization of	on line 6.) Its connected organization is a
Corporation Corporation w/o Capital Stock	k Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NO committee. (i.e., nonconnected committee)	T a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6	.)
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses ne committees/organizations, at least one of which is an authorized committee of a fec	•
(h) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, none of which is an authorized committee of a federal ca	
Committees Participating in Joint Fundraiser	
1. FEC ID num	nber C
2. FEC ID num	iber C
3. FEC ID num	iber C
	ber C

FEC Form 1 (Revised		Page 3
Write or Type Committee Nar		
The Lion Pride		1: 0400
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	ship PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connect	ared Organization Affiliated Committee Joint Fundraising Representative Lo	eadership PAC Sponsor
c. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in po	ossession of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and the n , assistant treasurer).	ame and address of
Full Name Ms. Britta of Treasurer	any Ballard	
Mailing Address	74 Montana Avenue	
-	Apt. B	
	Asheville	
Title or Position	CITY STATE	ZIP CODE
Treasurer		398 - 8668

FEC FOII	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
· ·		
	CITY STATE	ZIP CODE
Title or Position		
safety deposit bo	Depositories: List all banks or other depositories in which the committee deposits funds, hold oxes or maintains funds. Depository, etc.	
safety deposit bo	Depository, etc. MetaBank EXDO Event Center	
safety deposit be Name of Bank, I	Depository, etc. MetaBank EXDO Event Center	
safety deposit be Name of Bank, I	Depository, etc. MetaBank EXDO Event Center	ZIP CODE
safety deposit be Name of Bank, I	Depository, etc. MetaBank EXDO Event Center Denver CITY STATE	
safety deposit be Name of Bank, I	Depository, etc. MetaBank EXDO Event Center Denver CITY STATE	ZIP CODE
safety deposit be Name of Bank, I	Depository, etc. MetaBank	ZIP CODE
Safety deposit be Name of Bank, I Mailing Address	Depository, etc. MetaBank	ZIP CODE
Safety deposit be Name of Bank, I Mailing Address	Depository, etc. MetaBank	ZIP CODE