FEC FORM 1

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Only

STATEMENT OF **ORGANIZATION**

SHEMMIARY OF THE SENATE

17 MAR -3 PM 2: 12

			Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
LIEI1 TIZIEIL IFIOI	R COLORAD	<i>0</i>	
	<u> </u>		
ADDRESS (number and street)	2825 041	VIE STREET	
☐ ◀ (Check if address is changed)			
• ,	DENVER I		CO 8:0:2:0:7 - STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	ESS		
(Check if address is changed)	info@lei	+, E, e, I, f, o, r, c, o, l, o,	red 0, . C, 0, m
- io onangooy	Optional Second E-Mail A	Address	
COMMITTEE'S WEB PAGE AD (Check if address is changed)		ξ ₁ Ε ₁ L ₁ F ₁ O ₁ R ₁ C ₁ O ₁ L ₁ O ₁ R	<u> A D O - C O A - - - - - - - - - - - - - - - - - -</u>
2. DATE 0 3 ' 2	1 2017		
3. FEC IDENTIFICATION N	имвег ▶ С		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined to	his Statement and to the be	est of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	Melissa	Jordan	
Signature of Treasurer	he m		Date 02 2 2 2 2 7 2 0 1 7
NOTE: Submission of false, erron		on may subject the person signing t	this Statement to the penalties of 52 U.S.C. §30109 WITHIN 10 DAYS.
Office Use		For further information of Federal Election Commission Tall Free 800-424-9530	FFL FURIN I

Toll Free 800-424-9530

Local 202-694-1100

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	FEC F	rm 1 (Revised 02/2009)	Page 2		
TYP	E OF (OMMITTEE			
Cai	ndidat	Committee:			
(a)	X	This committee is a principal campaign committee. (Complete the candidate information belo	w.)		
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
	ne of didate	D, U, S, T, 1, N, L, E, 1, T, Z, E, L, , , , , , , , , , , , , , , , ,	 		
	didate y Affiliat	Office Sought: House X Senate President	State		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	ne of didate				
Par	ty Cor	nmittee:			
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.		
Poli	itical A	ction Committee (PAC):			
(e)	П	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its c	connected organization is a		
, -,		Corporation Corporation w/o Capital Stock	Labor Organization		
		Membership Organization Trade Association	Cooperative		
		In addition, this committee is a Lobbyist/Registrant PAC.			
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	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.)			
Join	t Fund	raising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate.			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political		
	Com	mittees Participating in Joint Fundraiser			
	1.	FEC ID number			
	2.	FEC ID number			
	3.	FEC ID number			
	4.		* * * * * * * * * * * * * * * * * * * *		

FEC Form 1 (Revised 02/2009)					
Write or Type Committee Name					
A /					

Page 3

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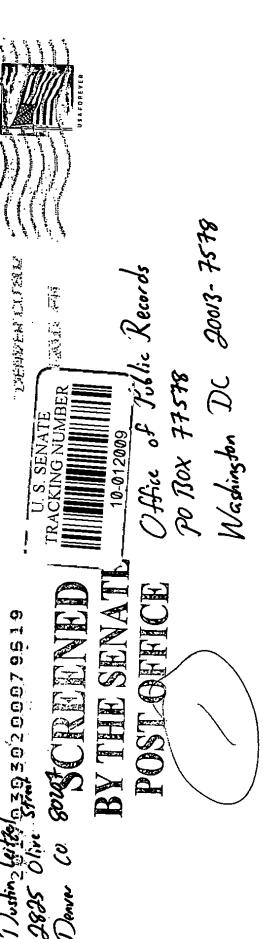
Telephone number

146-14	
Write or Type Cor	nmittee Name
None	
6. Name of Any	Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor
MONE	
Mailing Address	
	CITY STATE ZIP CODE
	CITY STATE ZIP CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor
-	
7. Custodian of F books and reco	ecords: Identify by name, address (phone number optional) and position of the person in possession of committee ds.
Full Name	CHRITISITI NIE ROISITI
Mailing Address	2,8,2,5, O,L,1,U,E, S,T,R,E,E,T,
	$D_1 \mathcal{E}_1 \mathcal{N}_1 \mathcal{V}_1 \mathcal{E}_1 \mathcal{R}_1$
Title or Position	
Title or Position	CITY STATE ZIP CODE
SEC. R.E.	Telephone number 7,2,0,-[9,3,5]-[0,7,1,3
	he name and address (phone number optional) of the treasurer of the committee; and the name and address of agent (e.g., assistant treasurer).
Full Name of Treasurer	M, E, L, I, S, S, A, T, O, R, D, A, N,
Mailing Address	[7,7,0,0, , €, ,A,C,A,D,€,M,Y, ,B,L,VD, ,S,O, I, , , , , , , , , , ,
	0,6,0,0,6,R,
	CITY STATE ZIP CODE

3030200079617 C)

Title or Position

201703030200079618



20013-857878 III

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DANA K. MACCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232

WASHINGTION, DC 20510-7116

United States Senate

OFFICE OF THE SECRETARY

PHONE(202) 224-0322

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED	Date of Receipt	
USPS FIRST CLASS MAI	5317 Date of Accept	Postmark
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USPS PRIORITY MAIL	Postmark	
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USPS EXPRESS MAIL	Postmark	
OVERNIGHT DELIVERY	SERVICE:	
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FEDERAL EXPRESS		
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AIRBORNE EXPRESS _	<u> </u>	
RECEIVED FROM FEDER	RAL ELECTION COMMISSION	ceipt
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OTHER	Description Description	
	Receipt or Postmark DATE PREPARED 3	 3 17



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