Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Lamborn For Congress P.O. Box 64107 ADDRESS (number and street) (Check if address is changed) Colorado Springs CO 80962 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS jean.lamborn@gmail.com (Check if address is changed) Optional Second E-Mail Address eve@equinoxbookkeeping.com COMMITTEE'S WEB PAGE ADDRESS (URL) lambornforcongress.org (Check if address is changed) DATE 2022 C00420745 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. Newman, Eve, , , Type or Print Name of Treasurer Newman, Eve,,, [Electronically Filed] Date 2022 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use

Toll Free 800-424-9530 Local 202-694-1100

(Revised 06/2012)

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	TYPE OF COMMITTEE:					
	Candidate Committee:					
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)					
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the car information below.)	ndidate				
	Name of Candidate LAMBORN, DOUGLAS, , ,					
	Party Affiliation REP Sought: House Senate President	State CO				
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate					
	Party Committee:					
	(d) This committee is a (National, State or subordinate) committee of the Republican, etc.)	Party				
	Political Action Committee (PAC):					
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	janization is a:				
	Corporation Corporation w/o Capital Stock Labor Organi	zation				
	Membership Organization Trade Association Cooperative					
	In addition, this committee is a Lobbyist/Registrant PAC.					
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)						
	In addition, this committee is a Lobbyist/Registrant PAC.					
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
	(g) This committee is an independent expenditure-only political committee (Super PAC).					
	In addition, this committee is a Lobbyist/Registrant PAC.					
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).						
	In addition, this committee is a Lobbyist/Registrant PAC.					
	Joint Fundraising Representative:					
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
	Committees Participating in Joint Fundraiser					
	1					

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V	/rite or Type Committee Name			
	Lamborn For C	ongress		
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor	
	Mailing Address			
		CITY ▲ STATE ▲	ZIP CODE ▲	
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponsor	
	_		_	
<ol> <li>Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession books and records.</li> </ol>				
	Newman, E	Ve, , ,		
	Full Name			
	Mailing Address	2526 Park Ave		
		Laramie   WY	82070	
		CITY ▲ STATE ▲	ZIP CODE ▲	
	Title or Position ▼			
	Treasurer	Telephone number	399 8574	
8.	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer).			
	Full Name Newman, E	ve, , ,	1	
	of Treasurer			
	Mailing Address	2526 Park Ave		
		Laramie	82070	
		CITY ▲ STATE ▲	ZIP CODE ▲	
	Title or Position ▼			
	Treasurer	307   Telephone number		

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	Full Name of Designated					
	Agent					
ſ	Mailing Address					
-	Title or Position <b>▼</b>	CITY ▲	STATE ▲	ZIP CODE ▲		
		Telephone r	number			
E s	Banks or Other leafety deposit box	<b>Depositories:</b> List all banks or other depositories in which the commes or maintains funds.	nittee deposits f	unds, holds accounts, rents		
١	Name of Bank, Depository, etc.					
	Wells Fargo					
N	Mailing Address	5190 N Academy Blvd				
		Colorado Springs	CO	80918		
		CITY ▲	STATE ▲	ZIP CODE ▲		
- N	Name of Bank, Depository, etc.					
N	Mailing Address					
		CITY ▲	STATE ▲	ZIP CODE ▲		