

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

|                                                                                                                                                                         |  |             |                                                      |                                                                                                                             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------|------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|
| 1. NAME OF COMMITTEE IN FULL<br>JEFF HURD FOR CONGRESS                                                                                                                  |  |             |                                                      |                                                                                                                             |
| ADDRESS (number and street) 2695 PATTERSON RD<br>STE 2                                                                                                                  |  |             |                                                      |                                                                                                                             |
| CITY<br>GRAND JUNCTION                                                                                                                                                  |  | STATE<br>CO |                                                      | ZIP CODE<br>81506-8815                                                                                                      |
| 2. NAME OF CANDIDATE<br>HURD, JEFFREY, , ,                                                                                                                              |  |             | 3. OFFICE SOUGHT (State and District)<br>House CO 03 |                                                                                                                             |
| 4. FEC IDENTIFICATION NUMBER<br>C00848333                                                                                                                               |  |             |                                                      |                                                                                                                             |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |  |             |                                                      |                                                                                                                             |
| A. FULL NAME<br>MIZEL, LARRY, , ,                                                                                                                                       |  |             |                                                      | Name of Employer<br>MDC HOLDINGS<br><br>Transaction ID : 67D7FF98AFFEB4F1<br><br>Occupation<br>EXECUTIVE CHAIRMAN OF THE BO |
| MAILING ADDRESS<br>4350 S MONACO ST<br>STE 500                                                                                                                          |  |             |                                                      |                                                                                                                             |
| CITY<br>DENVER                                                                                                                                                          |  | STATE<br>CO | ZIP CODE<br>80237-3400                               |                                                                                                                             |
| Date (month, day, year)<br>06/10/2024                                                                                                                                   |  |             |                                                      |                                                                                                                             |
| Amount<br>3300.00                                                                                                                                                       |  |             |                                                      |                                                                                                                             |
| B. FULL NAME<br>MOSS, JOHN, , ,                                                                                                                                         |  |             |                                                      | Name of Employer<br>PHOENIX PROJECT INC<br><br>Transaction ID : 65D54766DF8B24C91<br><br>Occupation<br>CEO                  |
| MAILING ADDRESS<br>PO BOX 3824                                                                                                                                          |  |             |                                                      |                                                                                                                             |
| CITY<br>GRAND JUNCTION                                                                                                                                                  |  | STATE<br>CO | ZIP CODE<br>81502-3824                               |                                                                                                                             |
| Date (month, day, year)<br>06/10/2024                                                                                                                                   |  |             |                                                      |                                                                                                                             |
| Amount<br>1000.00                                                                                                                                                       |  |             |                                                      |                                                                                                                             |
| C. FULL NAME<br>KOELBEL, SHERRIE, , ,                                                                                                                                   |  |             |                                                      | Name of Employer<br>HOMEMAKER<br><br>Transaction ID : 6488F524B89714F85<br><br>Occupation<br>HOMEMAKER                      |
| MAILING ADDRESS<br>5291 E YALE AVE                                                                                                                                      |  |             |                                                      |                                                                                                                             |
| CITY<br>DENVER                                                                                                                                                          |  | STATE<br>CO | ZIP CODE<br>80222-6911                               |                                                                                                                             |
| Date (month, day, year)<br>06/10/2024                                                                                                                                   |  |             |                                                      |                                                                                                                             |
| Amount<br>1700.00                                                                                                                                                       |  |             |                                                      |                                                                                                                             |
| D. FULL NAME<br>BUILDPAC                                                                                                                                                |  |             |                                                      | Name of Employer<br><br>Transaction ID : 6720C5B6207504AF4<br><br>Occupation                                                |
| MAILING ADDRESS<br>1201 15TH ST NW                                                                                                                                      |  |             |                                                      |                                                                                                                             |
| CITY<br>WASHINGTON                                                                                                                                                      |  | STATE<br>DC | ZIP CODE<br>20005-2899                               |                                                                                                                             |
| Date (month, day, year)<br>06/10/2024                                                                                                                                   |  |             |                                                      |                                                                                                                             |
| Amount<br>2500.00                                                                                                                                                       |  |             |                                                      |                                                                                                                             |
| E. FULL NAME                                                                                                                                                            |  |             |                                                      | Name of Employer<br><br>Occupation                                                                                          |
| MAILING ADDRESS                                                                                                                                                         |  |             |                                                      |                                                                                                                             |
| CITY                                                                                                                                                                    |  | STATE       | ZIP CODE                                             |                                                                                                                             |
| Date (month, day, year)                                                                                                                                                 |  |             |                                                      |                                                                                                                             |
| Amount                                                                                                                                                                  |  |             |                                                      |                                                                                                                             |
| SIGNATURE (optional)<br>KENNEDY, KATIE, , ,                                                                                                                             |  |             | DATE<br>06/12/2024                                   |                                                                                                                             |
| For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov                                                                   |  |             |                                                      |                                                                                                                             |

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