FEC FORM 1				nt o Atio			OB JHK 5	n ng	S. Use Only	
1. NAME OF COMMITTEE (in fu	sil)	(Check is chan			le:If typin e lines.	g, type	12FE41		<u></u>	
	te 200	8 								
ADDRESS (number and	street)	120 Mary1	and Aye	NE				<u> </u>	1 1 1	
(Check if addr	ess		<u>i i İ</u>	<u> </u>		<u></u>				
is changed)		Washingto	n <sub>II</sub>		<u> </u>		DC	20002	<u> </u>	<u> </u>
COMMITTEE'S E-MAIL	ADDRES	S		CITY			STATE		ZIP CODE	
compliance@dsc	c.org_		<u> </u>					lll		
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COMMITTEE'S WEB P	AGE ADD	RESS (URL)								
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COMMITTEE'S FAX NU	JMBER 3120	<u> </u>								
2. DATE	23	2008								
3. FEC IDENTIFICA	tion Nu	MBER	C	an a	1717 I. 1					
4. IS THIS STATEME	NT X	NEW (N)	OR		AMENE	DED (A)				
I certify that I have exa	mined this	s Statement and	to the bes	t of my kno	wledge a	nd belief i	it is true. corr	ect and col	mplete.	

Thomas Lopach Type or Print Name of Treasurer 23\* <sup>0</sup> 2008\*\*\* 01 Signature of Treasurer Date ić E Ŀ 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. For further information contact: Office **FEC FORM 1** Federal Election Commission Toll Free 800-424-9530 Use (Revised 12/2007) Only Local 202-694-1100 FE3AN042.PDF

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5.	TYPE	OF C	OMMITTEE
	Cane	didate	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 candidate information below.)
	Name Candi		
	Candi Party	idate Affiliatio	on Constrict Office State State State District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name Candi		
	Part	y Com	mittee:
	(d)	0	(National, State (Democratic, or subordinate) committee of the Republican, etc.) Party.
	Polit	ical A	ction Committee (PAC):
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
			Corporation Corporation w/o Capital Stock Labor Organization
			Membership Organization Trade Association Cooperative
	(f)	D	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 Leadership PAC. (Identify sponsor on line 6.)
	Joint	Fund	raising Representative:
	(g)	X	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.
	(h)		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.
		(and and a second s	
		Com	mittees Participating in Joint Fundraiser
		1.	Democratic Senatorial Campaign Committee FEC ID number
		2.	Udall for Colorad Inc. FEC ID number 00331439
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		5.	

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FEC Form 1	(Revised 12/2007)	
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Page 3

Write or Type Committee Nan	пе
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## Colorado Senate 2008

5. Name of Any Connecte	ed Organization, Affiliated Committee, Lead	ership PAC Sponsor or Joint I	Fundraising Representative
<u>                 </u>			
Mailing Address			
		STATE	
Relationship:			
Connected Organiza	tion 🔲 Affiliated Committee 📋 Lead	ership PAC Sponsor	nt Fundraising Representative
Full Name	120 Maryland Ave., NE		
	Washington	DC	20002
Title or Position	CITY	STATE	ZIP CODE
Treasurer		202 Telephone number	
. <b>Treasurer:</b> List the name any designated agent (e.	and address (phone number optional) of th g., assistant treasurer).	e treasurer of the committee; a	and the name and address of
	as Lopach		

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of Treasurer		
Mailing Address	120 Maryland Ave.,NE	
	Washington	
	CITY STATE ZIP CODE	
Title or Position		
Treasurer	$\begin{array}{c} 202 \\ 224 \\ 2447 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ $	

FEC Form	n 1 (Revised 12/2007)		Page 4
Full Name of Designated Agent	Darlene Setter		
Mailing Address	120 Maryland Ave. NEI		
	Washington		
	CITY	STATE ZIF	CODE
Title or Position	Treasurer	Telephone number 202 - 224	

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

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Name of Bank, [	Depository,	etc.										•																				
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FEC Form	1 (Revised	12/2007	'}					Page 4
			·					
Full Name of Designated Agent	Ellen M	arsha	a]1					
Mailing Address		1100	Bannoc	k St				
	l		<u> </u>	· <u> </u>			1	
	l	Denve	<u>r</u>			Lco_J	80204	
				CITY		STATE		ZIP CODE
Title or Position	<b>m</b>				<b>T</b> 1 5	, <u>1</u> 30	)3	4 15168
Assitant	treasure	<u>C   1</u>			Telephone nui			
safety deposit bo	xes or mainta	iins fun	ll banks or ds.	other depositories	in which the commit	lee deposits	funds, holds	accounts, rents
safety deposit bo Name of Bank, D	xes or mainta	iins fun	II banks or ds.	other depositories	in which the commit	Iee deposits	funds, holds	accounts, rents
safety deposit bo Name of Bank, C	xes or mainta	iins fun	II banks or ds. 	other depositories		lee deposits	funds, holds	accounts, rents
safety deposit bo Name of Bank, D	xes or mainta	iins fun	II banks or ds. 	other depositories		tee deposits	funds, holds	accounts, rents
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safety deposit bo Name of Bank, C Mailing Address	xes or mainta Depository, etc		II banks or ds. 					
safety deposit bo Name of Bank, C Mailing Address	xes or mainta Depository, etc		II banks or ds.					
safety deposit bo Name of Bank, C Mailing Address	xes or mainta Depository, etc		II banks or ds.					
safety deposit bo Name of Bank, D	xes or mainta Depository, etc		II banks or ds.					
safety deposit bo Name of Bank, D Mailing Address	xes or mainta Depository, etc		II banks or ds.					

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NANCY ERICKSON SECRETARY PAMELA B. GAVIN SUPERINTENDENT

Hart Senate Office Building Suite 232 Washington, OC 20510-2116 Phone: (202) 224-0322

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United	States	Senate
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OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:
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FAX
Date of Receipt
OTHER
Date of Receipt or Postmark
PREPARER KO DATE PREPARED 01.23.08



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