Only

## STATEMENT OF

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**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. GINO FOR SENATE 2601 S LEMAY STE 7 ADDRESS (number and street) #409 (Check if address is changed) FORT COLLINS 80525 CO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS GINOFORSENATE@REDCURVE.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) GINOFORSENATE.COM (Check if address is changed) DATE 01 2021 C00790279 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. MARTINEZ, RAY, , , Type or Print Name of Treasurer MARTINEZ, RAY, , , [Electronically Filed] 10 2021 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

F	EC Fo	rm 1 (Revised 02/2009) Page 2
		COMMITTEE  Committee:
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	e of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)  CAMPANA, GINO, , ,
Cand		CAIVIF AIVA, GIIVO, , ,
Cand Party	idate Affiliati	ion REP Office State Fresident District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Cand		
Part	y Con	nmittee:  (National, State (Democratic,
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Pa
Poli	tical A	action Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization
		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 segregated fund or pacommittee. (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.)
Join	t Fund	draising Representative:
(g)		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.
	Com	nmittees Participating in Joint Fundraiser
	1.	FEC ID number
	2.	FEC ID number
	3.	FEC ID number
	4	

FEC <b>Form 1</b> (Revised 0	2/2009)	Page <b>3</b>
Write or Type Committee Name		-
GINO FOR SEN	IATE	
	ganization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
NONE		
Mailing Address		
	CITY STATE Z	IP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the person in posse	ession of committee
	ADLEY, T, ,	
Full Name	138 CONANT STREET	
Mailing Address	SECOND FLOOR	
	BEVERLY MA 01915	
Title or Position	CITY STATE Z	P CODE
CUSTODIAN OF RECORDS	Telephone number 617 – 30	03 6800
. <b>Treasurer:</b> List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the name sistant treasurer).	e and address of
Full Name MARTINEZ	RAY, , ,	1
of Treasurer	2601 S LEMAY STE 7	
Mailing Address	#409	
	FORT COLLINS  CO 80525  CITY STATE ZI	P CODE
Title or Position TREASURER	Telephone number 970 – 69	

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Full Name of Designated Agent	CRATE, BRADLEY, T, ,				
Mailing Address	138 CONANT STREET				
-	SECOND FLOOR				
	BEVERLY MA 0191	5			
	CITY STATE	ZIP CODE			
Title or Position CUSTODIAN O	F RECORDS  Telephone number  617  —	303 - 6800			
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.  CHAIN BRIDGE BANK					
Mailing Address	1445-A LAUGHLIN AVENUE				
	MCLEAN VA 2210	)1 			
	CITY STATE	ZIP CODE			
Name of Bank, I	Depository, etc.				
Mailing Address					
Mailing Address					
Mailing Address					